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# MEDICAL AND SURGICAL JOURNAL.

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## PART FIRST.

### ORIGINAL COMMUNICATIONS.

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*Notes on some of the Chemical Reactions of Veratrine.* By T. G. WORMLEY, M.D.

Pure veratrine was dissolved in water by the aid of just sufficient hydrochloric acid. The veratrine when acted upon by nitric acid, exhibited a just perceptible yellow tint, and dissolved with a perfectly colorless solution.

In the following experiments, a small drop of a saturated solution of reagent was applied to a grain of the veratrine solution:

#### 1. POTASH.

1. $\frac{1}{100}$th, grain of veratrine in one grain of water, gives with a small drop of potash solution, a copious dirty white flocculent precipitate, not readily soluble in excess.

2. $\frac{1}{1000}$th, gives a very good precipitate, readily soluble in excess.

3. $\frac{1}{5000}$th, gives a perceptible cloudiness. A very small quantity of reagent must be used, otherwise no precipitate will be produced.

### 2. Ammonia.

This reagent behaves in the same manner as potash. Its limit is the same.

### 3. Chromate of Potash.

1. $\frac{1}{100}$th, gives a good light yellow amorphous precipitate, insoluble in excess.
2. $\frac{1}{500}$th, a very slight trace.

### 4. Bichromate of Potash.

1. $\frac{1}{100}$th, a copious yellow amorphous precipitate, insoluble in excess; readily soluble in acetic acid.
2. $\frac{1}{500}$th, a quite distinct reaction.
3. $\frac{1}{1000}$th, no indication.

### 5. Sulphocyanide of Potassium.

1. $\frac{1}{100}$th, gives a white flocculent precipitate, insoluble in excess.
2. $\frac{1}{500}$th, a pretty good precipitate.
3. $\frac{1}{1000}$th, no satisfactory indication.

### 6. Carbazotic Acid.

1. $\frac{1}{100}$th, a copious greenish yellow amorphous precipitate.
2. $\frac{1}{1000}$th, a very good greenish precipitate.
3. $\frac{1}{5000}$th, gives a quite distinct greenish cloudiness.

### 7. Terchloride of Gold.

1. $\frac{1}{100}$th, gives a canary yellow amorphous precipitate, which is not readily soluble in acetic acid. If the precipitate be acted upon by several drops of a strong potash solution, it does not entirely dissolve, nor does the mixture darken. If the precipitate be heated, it dissolves leaving some gum-like masses; upon cooling, the precipitate is reproduced without any darkening of the solution.
2. $\frac{1}{1000}$th, a good canary yellow precipitate, readily soluble in a few drops of solution of potash with a clear solution.
3. $\frac{1}{5000}$th, a greenish yellow precipitate, which dissolves by heat with a clear solution, and is reproduced upon cooling.
4. $\frac{1}{10000}$th, a quite good reaction.
5. $\frac{1}{40000}$th, gives a quite distinct cloudiness.
6. $\frac{1}{80000}$th, a just perceptible cloudiness.

### 8. Bichloride of Platinum.

1. $\frac{1}{100}$th, a dirty yellow amorphous precipitate.
2. $\frac{1}{300}$th, no indication.

### 9. Iodide of Potassium.

1. $\frac{1}{100}$th, a copious dirty white amorphous precipitate.
2. $\frac{1}{300}$th, a slight cloudiness.

### 10. Iodine in Iodide of Potassium.

1. $\frac{1}{100}$th, a copious reddish brown amorphous precipitate, entirely soluble in a few drops of potash solution.
2. $\frac{1}{1000}$th, a red brown, soluble in one drop of potash solution.
3. $\frac{1}{10000}$th, a good red-yellow amorphous precipitate.
4. $\frac{1}{40000}$th, a good green yellow.
5. $\frac{1}{70000}$th, gives a quite obvious greenish precipitate.
6. $\frac{1}{100000}$th, the precipitate is still perceptible.

### 11. Bromine in Bromohydric Acid.

1. $\frac{1}{100}$th, a copious yellow amorphous precipitate.
2. $\frac{1}{1000}$th, a good dirty yellow precipitate.
3. $\frac{1}{10000}$th, gives a greenish yellow precipitate.
4. $\frac{1}{50000}$th, a quite good precipitate.
5. $\frac{1}{100000}$th, a quite perceptible precipitate.

### 12. Ferrocyanide of Potassium.

1. $\frac{1}{100}$th, a copious dirty blue flocculent precipitate, readily soluble if excess of reagent is not used.
2. $\frac{1}{300}$th, a good cloudiness.

### 13. Ferricyanide of Potassium.

1. $\frac{1}{100}$th, a copious greenish precipitate, soluble in excess of reagent.
2. $\frac{1}{300}$th, no indication.

### 14. Tannic Acid.

1. $\frac{1}{100}$th, a copious dirty white amorphous precipitate.
2. $\frac{1}{1000}$th, much like 1.
3. $\frac{1}{10000}$th, a pretty fair precipitate.
4. $\frac{1}{40000}$th, a just perceptible cloudiness.

### 15. Sulphuric Acid.

This test should always be applied to veratrine or its salts in the dry state.

1. $\frac{1}{100}$th grain of veratrine, if touched with a drop of strong sulphuric acid, and gently warmed, immediately changes to a beautiful crimson; the color is not destroyed by heat, but very slowly by stirring in the mixture a small crystal of bichromate of potash.

2. $\frac{1}{1000}$th, much like 1.

3. $\frac{1}{10000}$th, if the veratrine deposit be heated, and then a small drop of the acid be allowed to flow upon it, it first becomes yellow, which almost immediately changes to crimson red, and dissolves, giving a solution of a quite perceptible red.

4. $\frac{1}{20000}$th, treated as in 3, the deposit gives a very satisfactory reaction; the solution has a just perceptible tint.

5. $\frac{1}{60000}$th, the deposit a just perceptible redish color.

There is no doubt but if the veratrine deposit was collected in one point, a much smaller quantity than that above stated would give a very distinct reaction. Sulphuric acid is much the most characteristic test we possess for the determination of veratrine.

There was a failure to obtain, in the crystalline form, any of the precipitates produced by any of the above reagents.

*Extraction of Veratrine, by Ether and Chloroform.*

1. The Chloride of Veratrine.—One grain of pure veratrine, dissolved in 100 grains of water by the aid of hydrochloric acid, and then the solution agitated for several minutes with an equal volume of *ether*. The ether then drawn off and evaporated to dryness, leaves a residue of $\frac{3}{100}$ of a grain of chloride of veratrine.

One grain of veratrine in 100 grains of water, by the aid of hydrochloric acid, and agitated with an equal volume of *chloroform*, and the chloroform evaporated to dryness, leaves an opaque vitrious residue of $\frac{33}{166}$ of a grain of chloride of veratrine.

2. Pure Veratrine.—One grain of veratrine, dissolved by hydrochloric acid in 100 grains of water, and the solution rendered slightly alkaline by potash solution, gives a copious white precipitate so dense as to make the liquid almost gelatinous. If now, the mixture be mixed with an equal volume of *ether*, and agitated for several minutes, and then the ethereal solution evaporated to dryness, it leaves a transparent vitrious residue of $\frac{91}{100}$ of a grain of pure veratrine.

When one grain of veratrine is treated as above and agitated with an equal volume of *chloroform*, and the chloroform solution evaporated to dryness, it leaves a perfectly transparent vitrious residue of $\frac{97}{100}$ of a grain of pure veratrine.

Columbus, O., June 15th, 1860.

*American Medical Association—Thirteenth Annual Meeting, held at New Haven, June 5th, 6th and 7th, 1860. Reported expressly for the Medical and Surgical Reporter, by* DR. J. SOLIS COHEN.

FIRST DAY'S PROCEEDINGS—MORNING SESSION.

The members of the Association convened at the Chapel of Yale College, and at 11 A. M., were called to order by the President, Henry Miller, M. D. of Kentucky.

A prayer was offered by Prof. Fisher, of Yale College.

Dr. Jonathan Knight, of Connecticut, on behalf of the Committee of Reception, welcomed the members of the Association to the hospitalities of the city. He spoke in graphic terms of the benefits accruing to the profession and to the world by the annual gatherings of the Association, which kept up a good feeling between distant members of the profession; he recommended such modes of action as would advance the general interests of the profession. He gave an epitome of the gradual progress of medicine, and dwelt at length upon the improvements in surgery, made during the present century, alluding to the operation of lithotripsy, the ligation of the large arteries, and the introduction of anesthetic agents. The address was listened to with profound attention, and greeted with marked applause.

Dr. Chas. Hooker, Professor of Anatomy and Physiology in the medical department of Yale College, as Chairman of the Committee of Arrangements, addressed the Association as follows:

"*Mr. President and Gentlemen of the Am. Med. Association:*—It is with unwonted gratification that the Committee of Arrangements welcome you to the city of New Haven. And we only bespeak the common feeling of our citizens in saying that we are delighted—nay, proud—to receive you as our guests. We feel that any city is highly honored to become the chosen place of meeting of the Am. Med. Association—a select delegated national Congress, representative of forty thousand members of a learned and humane profession. As a city, we appreciate this honor, and should be ungrateful did we not receive you with a generous and cordial welcome. You meet, gentlemen, for a great and noble object—for the promotion of science, vitally linked with the interests of humanity. Your meetings have a most happy influence in strengthening those ties by which the great Fraternity of Medicine are

bound in social compact. Another salutary incidental benefit of your meetings, result from their affording an annual period for relaxation and social enjoyment.

"Too many physicians prematurely break down in their career of usefulness, in consequence of unremitted and arduous application to their professional duties; and many of you now present, whose exhausted physical and mental energies need recruiting, could hardly have been drawn away from your routine of toil and care, but for your sense of bounden duty to aid in the great object of this Association. We congratulate you, therefore, brethren, on this annual recurrence of our National Medical Jubilee. In behalf of the Faculty of Yale, we welcome you to the halls of this ancient seat of learning, in which you are invited to hold your sessions; and in behalf of the citizens generally of New Haven, we tender you the hospitalities of our city.

"We hope that to all of you this meeting will be a season of pleasant social intercourse long to be remembered for the many friendships here formed; and we trust that the harmony and wisdom of your counsels will efficiently promote the great benevolent objects of our organization."

He then gave notice to the members that arrangements had been made to accommodate the meeting of the different sections as follows:

On Anatomy and Physiology—in Prof. Woolsey's lecture room.

On Surgery—in the Geological Cabinet.

On Practical Medicine and Obstetrics—in the Geological Cabinet.

On Chemistry and Materia Medica—in the Chemical Laboratory.

On Meteorology, Medical Topography, Epidemic Diseases, Medical Jurisprudence and Hygiene—in the Chemical Laboratory.

At the last annual meeting in Louisville, it had been recommended to divide the Association into the above sections, in order to facilitate the transaction of business.

After the calling of the roll by the Secretary, Dr. S. M. Bemiss, of Ky., on motion of Dr. John Atlee, all the medical officers of the Army or Navy present, were invited to take seats in the Association.

The committee appointed at the last meeting to prepare a code of parliamentary rules for the government of the Association, stated that their report, chiefly the work of Dr. Chas. A. Lindsley, of

Conn., was ready, and as it was brief, arrangements had been made for its immediate commitment to the press and distribution among the members, if adopted by the Association.

After some debate, the report was laid on the table.

A recess was here allowed, to permit the delegates from the different States, to choose their respective member of the Committee on Nominations.

At a quarter before one, the Association was again called to order, and the following gentlemen declared the Committee on Nominations:

District of Columbia—Dr. Boyle.
Maryland—C. C. Cox.
Kentucky—R. I. Breckenridge.
North Carolina—James H. Dixon.
Tennessee—I. S. White.
Delaware—Lewis P. Bush.
Louisiana—Austin Flint, jr.
Minnesota—D. W. Hand.
Georgia—N. W. Brown.
Massachusetts—D. Humphreys Storer.
Maine—Amos Nourse.
Indiana—Daniel Meeker.
New Jersey—J. S. English.
Rhode Island—James H. Eldridge.
New Hampshire—George H. Hubbard.
Illinois—A. S. McArthur.
Mississippi—U. G. Williams.
Michigan—C. L. Ford.
Pennsylvania—Wilson Jewell.
Iowa—D. L. McGugin.
Ohio—Robert Thompson.
Missouri—M. A. Pallen.
Vermont—Charles L. Allen.
Virginia—James H. Connag.
Connecticut—L. N. Beardsley.
South Carolina—H. R. Frost.
New York—H. D. Bulkley.

A motion was passed to invite the members of the Legislature of Connecticut, then in session at New Haven, to be present at the afternoon session, as the address of the retiring President, which

would then be delivered, would contain points of medico-legal interest.

On motion, the Association adjourned to meet again at 3 P. M.

AFTERNOON SESSION.

At 3 P. M., the Association was called to order by Vice President, H. F. Askew, of Delaware.

Gov. Buckingham and Lieut. Gov. Catlin, of Conn., on the platform, were introduced to the meeting by the chairman.

The retiring President, Dr. Henry Miller, of Ky., then read his valedictory address.

Our space does not permit us to give the address in full. We subjoin a few extracts.

"Gentlemen of the American Medical Association:—It affords me a great satisfaction to greet you as representatives of the American medical profession in this beautiful city—the city of Yale College—a city whose intelligent legislation has made ample provision for the education of her children. Let us accept our annual meeting on this classic ground as a token that our deliberations shall favor medical education, the improvement of which was the fundamental design of our National Association. In order that this great object should be readily obtained, I need not remind you how necessary a spirit of moderation is to all our discussions, and most fervently do I hope such a spirit prevails, to preside over all our sessions.

The duties of the President of this Association are exclusively parliamentary. He is not even empowered to fill vacancies in subordinate committees, much less to give information to the Association of the state of the profession, which, it may be presumed, has occupied his thoughts. During my term of office I have been obliged to assume the power of filling vacancies; and in the performance of this, my last official act, I shall take the liberty of adverting to topics of high concern, not only to our profession, but to the public at large.

"At the last meeting of the Association, a Committee on Criminal Abortion made their report, which was received and referred to the Committee on Publication. The resolutions appended to the report were adopted, and the President and Secretary authorized to bring this important subject, in the form of a memorial, before Congress, and the several legislatures in the different States

of the Union. By reference to the proceedings of the last annual meeting, it will be seen that the committee were requested to continue their labors, and take such measures as were necessary to carry into effect the spirit of the resolutions. The chairman opened a correspondence with me early last winter, offering to place at my disposal extra copies of the report, and also various papers published by him in the *N. A. Med. and Chirurgical Review*, containing all the matter necessary for the several legislatures to know, to act properly in the premises. I am happy to acknowledge my obligations for this gentleman's valuable assistance, not only in furnishing the documents he did, but in preparing a memorial, and an address to the State Medical Societies, asking their co-operation to bring this matter before the legislatures of their respective States. The memorial was transmitted, in January last, to the President of the United States and to the Governors of each of the States and Territories of the Union, the legislatures of several of the States being at the time in session. Of the disposition which has been made of these addresses I am not informed, but may indulge the hope that their Excellencies have submitted them to their various legislatures, or will embrace the earliest opportunity of doing so. From want of knowledge of the address of all the State Medical Societies, I was forced, in some instances, to direct to prominent medical gentlemen in various States, through whom I hope the papers reached their destination. I would here recommend that measures be taken by this Association to obtain annually a list of the various medical societies, and the address of their officers, to be published in our transactions. Besides permitting facility of correspondence, this would tend to bind our medical organizations more closely together, and render them more effective in the great work which it is proposed to accomplish through their instrumentality.

"Having laid before you, gentlemen, the measures which have been taken to carry into effect the resolutions adopted at the last meeting of the Association on this interesting subject, which involves the honor of our profession and the great interests of society, it becomes my duty to warn you that obstructions may be thrown in your path, which may require years of ceaseless vigilance and unremitting effort to overcome the popular ignorance on this subject, while many in your own ranks are to be watched. Popular sentiment either winks at abortion in the earlier periods of

fœtal development, or only admits it as an indiscretion on the part of the mother, or rashness on the part of the practitioner. This opinion is known to be based upon erroneous views of physiology, derived, doubtless, as all such errors are, from the false speculations of physiologists and naturalists of a former age. Would a poor, delicate-minded mother, who would shrink from the very idea of committing an immoral act, relieve herself of that which would otherwise become a burden upon her, were she informed by her physician of the enormity of the crime? The truth should be generally promulgated, that from the moment of conception, the new being, microscopic though it be, is endowed with all that appertains to the development of man. It is at once an individual being, and no more a part of the mother, though she bears it within her, than it is of the father; and is no more dependent on her during its development in the womb, than after birth, when it draws its sustenance from her breast. Were this taught universally, no woman, however degraded or fallen into vice, would go so far as to permit the destruction of her offspring.

"It is difficult for legislation in a free country, where the people are the source of all political power, to rise higher than popular sentiment and intelligence. But it is the duty of all our legislatures, in questions which can only be determined by the science of medical jurisprudence, to endeavor to elevate popular sentiment and remove the ignorance upon this point, rather than to degrade themselves. The necessity of legislation upon this point has been clearly pointed out by the chairman of the committee, and plausible suggestions for the enactment of a suitable law have been prepared by him. We hope the appeal made will not have been in vain."

The subject of medical education has occupied a large share of the attention of the American Medical Association since its first organization. It was indeed the urgent necessity of reform in the administration of its important interest to the profession which called forth from the Medical Society of the State of New York, a design for a National Medical Association, composed of delegates from the different medical societies and colleges, to meet in New York in May, 1846, and afterwards adjourned to meet in Philadelphia, in May, 1847, where it was resolved into the American Medical Association, which has since been in vigorous existence. Unfortunately there have been differences of opinion on the points

of medical education, between those of our profession who occupy the position of professors and those who do not, and I claim to be a mediator between them, as I have been with them, man and boy, for upwards of forty years, engaged in the study and practice of medicine, and for twenty-one years professor in a school, which at one time ranked third in the United States, in regard to the number of its pupils. Having laid aside the professorial garb two years ago, and become again one "among the herd," I am qualified to act as a "go between."

The system of medical education adopted in the United States, is derived from our British forefathers, and recognizes the right of the great body of the medical profession to preside over the initiation of candidates for its honors and emoluments.

On the continent of Europe young men are transferred from the gymnasiums to the academies to receive their first lessons, as well as the finishing instruction in the profession of their choice. The different effect of this system from our own is calculated to do injustice to our institutions. The medical schools of this country have always, at least in theory, admitted that it is at once the high privilege and duty of all regular members of the great medical body to receive properly qualified and educated young men into their offices as students, to prescribe their studies, and to prepare them to profit in the largest manner, by the advantages they can nowhere obtain so well as in a properly regulated medical school. The founders of our first medical school were those who first learned from private instruction before they went abroad to the schools.

Here the history of several distinguished medical men, who received their first medical education in the private office of a practitioner, was alluded to.

These men established on this side of the Atlantic, an institution, in which the American education by private tuition might receive its finishing touch and reward, without the risk of the dangers incident to travel in the old world.

Previous to the establishment of a medical school in Philadelphia, most of the students of medicine received their education in the shops of practitioners, where medical lore was imparted, and the practical part of the apothecary carried on; and after the school was started, a Philadelphia graduate was looked upon as something superior, and more reliable than the less favored multitude of physicians.

If, according to our American system, medical education has its beginning in private tuition, and complete in medical schools, it follows necessarily that it is in the function of the schools to receive their students at the hands of private teachers engaged in the practice of their profession, and to require vouchers that they have gone through the proper course of necessary training.

To dispense with this preparatory course would be a violation of the contract between public and private individuals, and also be an egregious wrong to the students themselves, by an attempt to instil into their minds an instruction which, by previous culture, they are not prepared to receive.

The true distinctions between physicians are not between professors and laymen, but between public and private teachers of medicine. Were medical instruction among us entirely committed to the schools, as in most European countries, this distinction would not exist.

Dr. Miller went on to say, that enough precaution was not taken even in selecting professors; that many teachers were unfit for their position, and their examinations of students were a farce. The qualifications of professors ought to be insisted on as well as the qualifications of students.

He spoke of the practical essays of Dr. Drake on medical education, published in 1832, in which he complained of the necessity of a higher standard of medical excellence, and the extraordinary increase in the number of medical colleges in the United States, and stated that one cause is a want of due care in the selection of professors, by which, at present, the standard of excellence is such as to bring into responsible position those of even less than mediocrity in medical lore and literature.

The necessity of reform in the selection of teachers and the examination of candidates, was fully insisted on.

The Secretary, Dr. Bemiss, of Kentucky, then read additional names of delegates whose credentials had been examined by the Committee on Credentials since the morning meeting.

The Nominating Committee here reported the following names as those of officers for the ensuing year. The gentlemen nominated were elected by acclamation:

President—Eli Ives, Conn.

Vice-Presidents—Wilson Jewell, Pa.; A. B. Palmer, Mich.; Jos. P. Logan, Ga.; Jos. N. McDowell, Mo.

Treasurer—Casper Wistar, Pa.

The Chairman then appointed the following escorts to the officers elect:

For Escort to President—Jonathan Knight, Conn.; Dixi Crosby, N. H.

For Escort to Vice-Presidents—W. C. Snead, Ky.; Wm. Brodie, Mich.; Edward Warren, Md.; R. C. Foster, Tenn.; K. J. Bowditch, Mass.; Lewis A. Sayre, N. Y.; Jno. L. Atlee, Pa.; Austin Flint, Jr., La.

A number of communications were then read, inviting the members of the association to visit the carriage factories of Messrs. J. & D. Cook & Son, and Messrs. Laurence, Bradley & Pardee, and also an invitation from Wm. H. Russel, M. D., to visit the evening drill and parade of the students in his Collegiate and Commercial Institute.

These were accepted, and hours set apart in which the members could visit the above places without interfering with attendance on the meetings of the Association.

Business was then suspended while the officers elect were conducted to their places by the Committees of Escort, and severally introduced to the Association by the Chairman, Dr. H. F. Askew, of Del.

Dr. Eli Ives, President, in taking his seat, made a short address, in which he stated that, in giving thanks for the honor conferred upon him, he would be ungrateful not to publicly thank the profession for all he was and all he possessed. All his property and reputation had been derived from his profession, and therefore deserved his thanks. His father had been a physician, and one of the founders of medical societies; he had two sons and one grandson, physicians. He had always loved and enjoyed his profession, and to all present he would repeat what Dr. Rush remarked to his class in 1801 and '2: "Gentlemen, if you don't like your profession, the sooner you leave it the better." He had been practicing medicine longer than any present, and that when he could no longer do so, he would himself be carried to the bed side.

Dr. Wilson, Jewell, of Pa., stated that it is not customary for Vice-Presidents to make addresses on their election, or to preside over the deliberations of the electing body. The first he would not attempt, but at the request of the President (who is too aged and feeble to preside), he would attempt the latter, and all he asked

was allowance for any of his infirmities. He would endeavor to preside with strict impartiality.

Dr. N. S. Davis, of Ill., introduced the following resolutions, to carry into effect the arrangement adopted at the last meeting of the Association, to facilitate the transaction of business in the consideration of scientific matters by the division into sections:

*Resolved*, That the general meetings of the Association, after this day, shall be restricted to the morning sessions, and the afternoon sessions, commencing at three o'clock, shall be devoted to the hearing of papers and discussions in the several sections.

*Resolved*, That each section shall choose its own officers, and make its own rules of order.

*Resolved*, That all essays, voluntary communications and reports, except those from the officers of the Association, and the committees on medical education, medical literature, and the committees on prize essays, shall be first presented or referred to the appropriate section and receive its recommendation, before they can be referred to the committee on publication.

The first and second resolutions were adopted. The reading of the third resolution called forth considerable discussion, during which several amendments were proposed and withdrawn. Some members thought that everything appearing in the printed account of the transactions, should undergo proper revision and alteration by a special committee; others were of opinion that the Association was not responsible, as an association, for everything that emanated from them, and therefore addresses and papers should appear in the original language of their authors without alteration. Several gentlemen refused to submit their papers to any revision, and stated that if the Association did not choose to print them as they were, they would publish them themselves at their own expense. Over an hour was consumed in this discussion, when, on motion, the resolution was laid on the table to give the mover an opportunity of so altering it as to meet the views expressed by the different members.

On the recommendation of Drs. Timothy Child and David S. Conant, Dr. Wm. B. Little, of San Francisco, Cal., was admitted a member by invitation: there being no representative from his section of the country, a member of the Association. The following gentlemen were appointed a Committee on Voluntary Communications:

E. D. Force, Ky.; Thos. W. Blatchford, N. Y.; N. D. Davis, Ill.; —— ———, Rochester, N. Y.; Dr. Renchberger, Pa.

The Treasurer, Caspar Wister, M. D., of Pa., then made his report:

He reported that out of a list of 2,000 names, he had only some 200 annual subscribers to the volume of Transactions, and these were obtained only after the persisting solicitations of the Treasurer, addressed to each permanent member, announcing the publication of the last volume of the Transactions. Of the printed volumes of Transactions, there were still on hand, for sale at the following prices: years 1846 and '7, of the organization of the Association, 50 cents each.

Vols. 1, 2, 3, and 4, out of print.

Vols. 5, 7, 8, 9, collectively as a set, $5 00, separately $2 00 each.

Vols. 6, 10, 11, at $2 00 a volume.

Vol. 12, at $3 00.

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| Cash on hand, April 15, 1859, - - - - | $651 00 |
| Received from delegates for last volume of Transactions, - - - - - - - - | 2,430 00 |
| On hand, - - - - - - - - - | 597 61 |

The report was accepted, and referred to Committee on Publication.

On behalf of the Committee on Publication, Dr. Caspar Wister reported that the delay in the appearance of the last volume of the Transactions had been caused by the delay of the authors of several articles in returning corrected proofs of their articles, the proofs having in one instance been detained nine weeks, and in another fourteen weeks. The committee hoped some action would be taken to prevent a similar occurrence in the future. The cost of printing the last volume of Transactions had been $1,659 00.

There were remaining on hand, of the volumes containing the proceedings of the first meeting of the Association, 45 copies; vol. 5, 241 copies; vol. 6, 11 copies; vol. 7, 51 copies; vol. 8, 212 copies; vol. 9, 242 copies; vol. 10, 165 copies; vol. 11, 152 copies; vol. 12, 497 copies.

The report was received, and referred to the Committee on Publication.

No other committees being prepared to report, the Association, on motion, adjourned.

SECOND DAY—WEDNESDAY, JUNE 6, 1860.

The Association was called to order at the Chapel of Yale College, at 9 o'clock A. M., by Vice President Dr. Wilson Jewell, of Pa. The minutes of the previous day's proceedings were read and adopted. On motion of Dr. Gardner, of Mass., the rules of order were suspended, to allow V. P. Dr. Logan to offer a resolution. Dr. Logan then tendered his resignation as Vice President, which was accepted.

The Committee on Education, through Dr. Reese, of New York, Chairman, made their report.

The report urged the adoption of a higher standard of qualifications than are now considered requisite. The present winter sessions were considered too short, and they thought the session should continue six or nine months, and there be fewer lectures on each day.

They urged the introduction of chairs on various subjects, now not taught in medical schools, such as hygiene, medical literature, &c.

The report considered sufficient attention was not paid to clinical (at the bedside) instruction, and that the required curriculum of study should be extended to various collateral branches, without a knowledge of which no man could properly perform his duties as a physician, even though he possess diplomas from regular medical schools; and they urged upon the Association the importance of taking prompt and efficient action to increase the standard of the profession, as whatever reform was to be instituted, should emanate from this body, and the matter should be taken in hand immediately, instead of appointing successive committees, thus incurring a year's delay, again and again.

The Committee desired to be considered as having no desire for any fastidious reform, but only desired such changes as would increase the general interests of the profession.

In conclusion, the Committee offered the following preamble and resolutions, which they desired to be considered as part of their report:

PREAMBLE.

*Whereas*, It is the deliberate judgment of the American Medical Association, that the time has fairly come for the introduction of improvements into the present system of medical education, which

shall elevate the existing standard of qualification for the Doctorate, and especially for securing and encouraging a higher degree of attainment in the science and of skill in the art of medicine than has been heretofore accessible to students in our country, and

*Whereas,* This body of American Physicians is regarded by our fraternity everywhere, as the acknowledged head and representative of the medical profession in the United States, and it is therefore looked to for prescribing the terms and qualifications of those who are henceforth to be admitted and recognized into our fellowship as brethren and equals in the profession; therefore,

*Resolved,* That it be hereafter regarded as an indispensable pre-requisite to enrollment as a student of medicine in the office of any regular physician, that the party shall be at least seventeen years of age, of good moral character and habits, and shall have received a good English, classical and mathematical education, and be able to read and translate the Latin language, and have an elementary knowledge of Greek, so far, at least, as to be able to trace the derivations from it to the English language.

*Resolved,* That this same requisite be made indispensable before matriculation in any regular medical college can be allowed, and that the faculty of such college, and the preceptor of such candidate for enrollment, be required to ascertain such qualification by actual examination, and to certify thereto.

*Resolved,* That the term of study in the office of a regular practitioner, including attendance upon lectures, be and is hereby extended to four years, the last year to be mainly employed in receiving clinical instruction in medicine, surgery and midwifery.

*Resolved,* That three full courses of lectures in a regularly incorporated college, or other body of lecturers recognized by the Association, be required of all candidates for the degree of Doctor of Medicine. Said candidate may be admitted to examination after three full years of study, on all the branches which they have been required to study, except clinical medicine, as above.

*Resolved,* That the period of instruction in every college be extended through the full term of nine months in each year, and that this time be divided into two sessions, the first to be chiefly occupied in instruction in the elementary branches only, and the latter to the practical and more complete branches. Those in attendance upon the former to constitute the junior class, and that upon the

latter the senior. Not more than four lectures to be delivered on each day in either of the departments, and that each lecture be preceded by a recapitulation, in the form of question and answer of the lectures of the day before.

*Resolved*, That the number of professors in each college should be increased, so as to bear some proportion to the largely increased number of branches, a knowledge of which is necessary. This increase to be made in addition to those holding clinical chairs.

*Resolved*, That the examination of all the students for matriculation, which admits them into the junior class, shall be repeated before their entrance into the senior class, either by the Faculty, or by examiners appointed by them for the purpose, who shall certify in the one case to the fullness of their preliminary education, and in the other to their improvement, under courses of instruction in the junior or elementary department. Admission to the senior class should be contingent upon this latter examination. Similar examinations should be required at the commencement of each session, as to the improvement made in the preceding term.

*Resolved*, That the final examination for graduation, if made by the Faculty, should be in the presence of each other, and should be witnessed and certified by a board or committee of equal numbers, to be appointed for the purpose by each State Society, within whose bounds any college may be located, or by the Faculty, and without whose approval the degree should not be conferred. Due notice to be given by the Faculty of the time and place for the examination, and each candidate to be separately examined.

*Resolved*, That no medical college be recognized by the American Medical Association to be complete in its organization, and prepared to furnish the requisite instruction, which does not either possess a hospital of its own, or which has not made arrangements with a hospital containing not less than eighty beds, for the students of the college receiving regular clinical instruction, before being licensed to practice.

*Resolved*, That the so-called "College Clinics" cannot, in any useful or practical sense, be looked on as furnishing an adequate substitute for the clinical teaching required.

*Resolved*, That this Association regard with marked disapproval a practice which prevails with some of the Faculties of the School, viz: Of examining those students who are candidates for a de-

gree, before the expiration of the regular session, and while the lectures are still in progress.

*Resolved*, That the titles of the several chairs in a school, as announced in its curriculum, ought to indicate a real teaching of the branches thus virtually promised to be taught, and not be assumed merely in conformity with further usage, or to gratify the temporary whim of a professor, to have an appendage to the title of his chair, while in the very next year he may abandon, and consent to its being appended to some other chair, or to its being omitted entirely in the next annual announcement. We may instance this, attaching physiology to anatomy, the latter being the substantive branch, and of itself taking up the whole time of the professor during the entire session, which is still too short for its legitimate purposes. Still more common and misleading is the appendage of diseases of women and children to midwifery, and that of medical jurisprudence at one time to materia medica, at another to midwifery, at a third to chemistry.

All of which is respectfully submitted.

(Signed) D. Meredith Reese, Ch'n, (N. Y.)
John Bell, (Phila.)
W. K. Bowling, (Tenn.)
Z. Peletier, (Mich.)
Chas. Fishback, (Indiana.)
*Committee on Medical Education.*

On motion of Dr. McDowell, (Mo.) the Association went into Committee of the Whole, to consider the above resolutions, and after some debate arose, reporting progress, and asked leave to sit again.

Report of Committee on Medical Literature was referred to the Committee on Publication, without reading.

The Committee on Nominations reported that they recommended the next meeting of the Association to take place in Chicago, Ill., on the first Tuesday in June, 1861.

They nominated the following officers:

*Secretaries.*—S. G. Hubbard, Conn.; H. A. Johnson, Ill.

*Committee of Arrangements.*—N. S. Davis, Ill.; G. W. Freer, Ill.; De Laskie, Willon, Ill.; E. Andrews, Ill.; H. W. Jones, Ill.; Thos. Bevans, Ill.; J. Bloodgood, Ill.

*On Prize Essays.*—Dan'l Brainard, Ill.; D. L. McGuigan, Iowa; M. L. Leaton, Mo.; Jno. Evan, Ill.; A. L. McArthur, Ill.

*Committee on Publication.*—F. G. Smith, Pa.; Caspar Wister, Pa.; S. C. Hubbard, Conn.; R. J. Breckenridge, Ky.; Edward Hartshorne, Pa.; H. F. Askew, Del.

*Vice President.*—In the place of D. Logan, resigned, R. D. Arnold, Ga.

These officers were elected by acclamation.

Committee on Prize Essays reported they had received no essay, in their opinion, worthy of awarding a prize; which report was referred to the Committee on Publication.

The rules of order were suspended to bring up the third resolution of Dr. Davis, of Illinois, laid on the table yesterday.

The resolution was at length adopted under the following form:

*Resolved*, That all essays, voluntary communications and reports, except those of officers of the Association, reports of committees on medical education, medical literature and prize essays, shall be first presented to the Association and referred to the appropriate section, in which they shall be examined and discussed; after which they shall be returned to the secretary of the association, accompanied by an expression of opinion as to whether they are worthy of publication or not, and the secretary shall pass all such designated to be worthy directly to the Committee on Publication; and others not so designated shall be retained by the secretary or returned to their authors, as the latter may indicate.

Dr. Lewis A. Sayre, N. Y., was appointed a special Committee on Morbus Coxarius and Surgical Pathology of Articular Inflammation, read his report, which was confined to the first subject, giving an account of 72 cases, and the operations performed. Referred to the Surgical Section.

Surgical Treatment of Strictures of the Urethra—James Bryan, Penn., reported progress, and asked for longer time. Referred to its proper section.

Drainage and Sewerage of large cities, their Influence on Health—A. J. Semmes, Cornelius Boyle, G. M. Dove, D. C., reported progress, and asked for longer time.

Puerperal Tetanus: its Statistics, Pathology and Treatment—D. L. McGuigan, Iowa. Report the same as above.

Hospital Epidemics—R. K. Smith, Penn. Laid over.

Puerperal Fever—S. N. Green, Indiana. Laid over.

Anæmia and Chlorosis—H. P. Ayers, Indiana. Reported progress, and asked to continue the committee to report next year.

Veratrum Viride—J. B. McCaw, Va. Laid over.

Alcohol: its Therapeutical Effects—J. W. Dunbar, Md., asked for a change in the title, making it read, "Alcohol in its relations to man;" granted. Report next year.

Meteorology—J. G. Westmoreland, Ga. Laid over.

Milk Sickness—Robt. Thompson, Ohio; partial report made; accepted and referred to section of Practical Medicine.

Manifestations of Disease of Nervous Centres—C. B. Chapman, Wisconsin. Laid over.

Microscopic Observations on Cancer Cells—Geo. N. Norris, Alabama, chairman, asked to resign. Committee discharged.

Philosophy of Practical Medicine—James Graham, Ohio. Laid over.

On some of the Peculiarities of the North Pacific and their relations to Climate—William H. Doughty, Georgia. Absent.

On the Microscope—John C. Dalton, Jr., N. Y.; David Hutchinson, Ind.; A. R. Stout, Cal.; Calvin Ellis, Mass.; Christopher Johnson, Md. Report next year.

Diseases and Mortality of Boarding Schools—C. P. Mattingly, Ky., Dixi Crosby, N. H., reported progress. Referred to its proper section.

On Various Surgical Operations for Relief of Defective Vision—M. A. Pallen, Mo.; T. J. Cogley, Ind.; W. Hunt, Penn. Laid over.

On the Blood Corpuscle—W. Sager, Michigan. Referred to proper section, with additional time.

American Medical Necrology—C. C. Cox, Md. Report was ordered to be read before the Convention Thursday; amended to have Dr. Cox retained as chairman, and report next year.

Effects of the Virus of the Rattlesnake, when introduced in the System of Mammalia—A. S. Payne, Va. Reported progress and was discharged.

Constitutional Origin of Local Diseases, and the Local Origin of Constitutional Diseases—W. H. McKee, N. C.; C. F. Haywood, N. Y. Laid over.

Subcutaneous Injections as Remedials—I. Langer, Iowa; not allowed to report, not being an accepted delegate.

Quarantine—D. D. Clark, Pa.; E. M. Snow, R. I.; W. Jewell, Pa.; E. D. Fenner, La.; I. W. Houck, Md.; asked to be continued. Agreed to.

Medical Ethics—B. F. Schenck, Pa., chairman, resigned, and asked that Dr. Paul F. Eve, of Tennessee, be substituted; agreed to. Report next year.

Tracheotomy in Membraneous Croup—A. N. Dougherty, N. J. Partial report. This was accepted, and referred to the Surgical Section. Further time allowed to make out the report.

Effect of Perineal Operations for Urinary Calculi upon Procreation in the Male—J. S. White, Tenn. Letter from Dr. White read; laid over.

Mercurial Fumigation in Syphilis—D. W. Yandell, Kentucky. Laid over.

Cause and Increase of Crime—W. C. Snead, Ky.; asked to be continued. Agreed to.

Education of Imbecile and Idiotic Children—H. P. Ayres, Ind. Report offered; referred to its proper section.

Pons Varolii—Partial report. The committee wished to be continued; agreed to. Referred to Section on Anatomy.

The committee on Voluntary Communications reported that they had received several communications on different subjects, which were referred to their appropriate sections.

Several reports and abstracts of reports on special subjects were presented, and referred to their appropriate sections.

One o'clock, the hour of adjournment, having arrived, a motion to continue five minutes longer prevailed. A little general business was then transacted, and the Convention adjourned.

There was no general meeting of the Association on the afternoon of the 6th inst., as by a resolution passed in the morning, the different sections to which special papers were referred met to discuss the particular subjects allotted to their consideration, the members of the Association distributing themselves, and visiting that section in whose deliberations they felt most interest. These sections met in different rooms, as follows:

Section on Anatomy and Physiology, in President Woolsey's Lecture Room.

Section on Surgery, in the Geological Cabinet.

Section on General Medicine, in the Geological Cabinet.

Section on Chemistry and Materia Medica, in the Laboratory.

Section on Meteorology, Medical Topography, Epidemic Diseases, Medical Jurisprudence and Hygiene, in the Laboratory.

THIRD DAY.

The Association was called to order at 9 A. M. by the President, Dr. Eli Ives; afterwards, Dr. Jewell, of Philadelphia, presided.

The minutes of the previous day's proceedings were read by the first secretary, Dr. S. G. Hubbard, of New Haven.

A list of newly registered delegates was read, making the number over five hundred.

On motion of Dr. Arnold, of Georgia, it was resolved that no communication read before the Association should occupy more than ten minutes in its reading, and no speaker should occupy the floor longer than ten minutes.

On motion of Dr. Shattuck, of Massachusetts, the rules of order were suspended, in order to allow Dr. Bowditch, chairman of the committee appointed to take into consideration the propriety of contributing in the erection of a suitable memorial to John Hunter, in Westminster Abbey, to present his report. On motion, it was resolved that the Committee on Nominations be requested to consider the report and resolutions attached to it, and report thereupon, presenting the names of one from each State represented, who shall be empowered to take such action in the matter as may be hereafter agreed upon by the Association.

The Committee of Conference appointed to confer with the Committee of medical teachers, reported through their chairman that they had had several meetings in New York and New Haven, during which the subject of medical education had been fully discussed. He stated that in the convention of teachers the following resolutions were adopted:

"1st. *Resolved*, That the Medical Colleges represented in this Convention, are willing to adopt the rule, if it be recommended by the American Medical Association, that every candidate for degree of Doctor in Medicine must present certificates of having assiduously studied medicine during the period of three full years under the direction of a regular practitioner of medicine, recognized as such by the American Medical Association, who shall certify to the same under his own hand, and of attendance on two *full* courses of medical lectures in a medical school, recognized as regularly organized by the American Medical Association, with an interval of at least three months between the termination of the first course and the commencement of the last.

"2d. *Resolved*, That the medical colleges represented in this Convention are willing to keep a register of their students, in which shall be entered the name, the age, the period of commencing medical studies, and diploma already received, with the name of the college conferring it, and the name of the preceptor.

"3d. *Resolved*, That the medical colleges represented in this Convention, allowing that the proposed plan of admitting delegates from State Societies to attend the examination of the candidates for the degree of Doctor in Medicine to have been successfully carried out in several places, do not think that it can with advantage be universally adopted; but at the same time they are ready to ascertain and discuss any other measure by which the admission of unsuitable and unworthy members within the ranks of the profession can be prevented.

"4th. *Resolved*, That this Convention earnestly recommend the American Medical Association to adopt such measures as will secure the efficient practical enforcement of the standard of preliminary education adopted at its first organization in May, 1847, or of a standard put forth by the medical society of the State in which a college is located, and that medical colleges will thankfully receive and record the certificates alluded to in said standard, and one of moral character, whenever the profession generally and the preceptors will see that students are properly supplied with them.

"5th. *Resolved*, That hospital clinical instruction constitutes a necessary part of medical education, and that every candidate for the degree of Doctor in Medicine, shall be required to have attended such instruction regularly for a period of not less than four months.

"6th. *Resolved*, That the members of this Convention are ready to coöperate in any efforts by which the attention of the community and of legislatures shall be called to the importance of the endowment of medical colleges and professorships.

"7th. *Resolved*, That the attention of the American Medical Association be called to the proofs, in a letter from a German medical professor, of the degree of Doctor in Medicine being conferred in Germany on unsuitable persons, to be used in this country."

[At the meeting of the Convention of Medical Teachers, during the discussion on the above resolutions, Prof. Logan, of Georgia, offered the following as a substitute:

WHEREAS, It is apparent that the medical colleges of the United States are not disposed to adopt the measures indicated by the American Medical Association, for the establishment of a higher system of medical education, as manifested by the failure upon the part of a large portion (and among the number some of the most prominent) to be represented at the Convention of Colleges, held last year in Louisville, and by a renewal of the same course of action towards the adjourned meeting of said Convention, and as no action on the part of the colleges represented would be likely to effect any change in the present system of medical education, and any attempt on the part of this limited representation to initiate any reform might be regarded as an offensive assumption of power; therefore,

*Resolved*, That this body declines to act for the medical colleges of the United States.

*Resolved*, That in the medical colleges alone resides the power of effecting any desirable change in the present system of medical education, and it is only from their united action that any good result can be expected.

*Resolved*, That a committee of —— be appointed to report the action of this body to the American Medical Association.

The substitute was discussed by Profs. Logan, Shattuck, Crosby, McGugin, McDowell, Storer, and Palmer, and was finally rejected.]

The chairman then read the following communicatiun, addressed to the Convention of Teachers, by Prof. Henry N. Frost, of the Medical College of South Carolina, in regard to medical education in the South:

"I should wish to be heard while I make a few remarks on the progress of education at the South, and the advances we have made in fulfilling the requirements of the Association. The report in my hand of the Dean of the Medical College of the State of South Carolina, of the graduates of that college and their requirements, presents a total of one hundred and fourteen graduates, all of whom had a preparatory education, such as the Association requires. Nearly all, with the exception of six, have had good literary opportunities: some graduates of colleges—others of academies of high repute—others instructed in the classics. Even those whose studies were confined to English, have had their minds strengthened by the study of mathematics.

"In making this statement, I would not be understood to say,

that they were well versed in the classics; but they have enjoyed the opportunity, and profited in a greater or less degree by it. Neither would I be understood to say that our graduates are all doctors. The diploma conferred is only an evidence that they have undergone a course of study; that they have been instructed in the principles of the profession, and made acquainted with the means by which they are to arrange and systematize the various occurrences presented to them; in short, that the foundation has only been laid by which they are to pursue advantageously their researches, and act for themselves. To be able doctors and successful practitioners requires years of study and observation, and there are many who, after all this application, have never been made doctors.

"The community in which a young graduate resides, soon becomes aware of this fact; it is only after a long apprenticeship, and years of toil and devotion to his business, that he acquires practice and confidence. Confidence is proverbially a plant of slow growth, and it is only after the individual has proved himself worthy that it is freely bestowed. Still, however, every doctor has been a student, and as such has to endure taunts and imputations as to his qualifications. I well remember when a student in medicine, forty-seven years since, fashionable ladies commented upon the homely appearance and neglected dress of the students of Philadelphia, and tauntingly remarked that there was little to be observed in the streets but dogs and Virginia doctors! Yet from these classes, of whom these remarks were made, there came forth a Wood, Mitchell, Meigs, McClelland, Hodge, Bartons, Derach, and, not to forget my own section, Dickson, Holbrook, Ramsay, and many others. Yet these young men were as ungainly as many at the present day; but they contained the gem, as many at the present day, which required only to be polished. Education has been progressive to my observation; our graduates show their desire to excel by seeking opportunities abroad for greater acquirements. In my day, our reading was desultory and without system. My preceptor pointed to his library, and told me to select my reading. My anatomical studies were pursued with a scalpel and the Dublin dissector. Our clinical instruction was nothing virtually. Mark the difference at the present time: your winter and summer courses; your crowded hospitals; your private instructions, and

your model plates, &c. All these speak trumpet-tongued, that the work of improvement is onward."

In conclusion, the committee offered the following resolutions for adoption by the Association:

*Resolved*, That it is the duty of medical colleges to require of every candidate for the degree of Doctor of Medicine, certificates of study during the full period of three years, under the direction of a regular practitioner of medicine, recognized by the American Medical Association, who shall certify, under his own hand, as to an attendanee on two full courses of lectures, with an interval of at least three months between the termination of the first and the commencement of the second course.

*Resolved*, That every medical college shall keep a volume, in which every medical student presenting himself, shall enter his name, his age, the period of his commencing the study of medicine, any diploma he may have received in evidence of previous education, with the name of the college or school from which he received such diploma; and the name of the preceptor with whom he has been studying.

*Resolved*, That hospital clinical instruction constitutes a necessary part of medical education, and every candidate should be required to have attended such instruction regularly for a period of not less than four months.

*Resolved*, That the professors of every medical college should recommend to their trustees, or board of managers, the adoption of a rule authorizing them to allow the attendance of two or three delegates, from the State Medical Society, at all examinations of candidates for the degree of the doctorate, and accord to these delegates a vote on the question of recommending such candidates for a degree.

*Resolved*, That every State Society be recommended to choose proper delegates at its annual meeting, to attend the examination of candidates for the degree of M. D., at all the medical colleges within their respective States.

*Resolved*, That this Association will not recognize as a regular organization, any college which does not require evidence of suitable preliminary education from all applicants for collegiate medical instruction.

*Resolved*, That we commend the use of all proper efforts, by which the attention of persons of means and liberal disposition, as

well as legislative bodies, shall be directed to the propriety of endowing such medical colleges, and professorships thereof, as shall be recognized by the Association.

*Resolved*, That this Association recognize as a regularly organized medical college, one which has been represented at any meeting of this Association, and which complies with the preceding rules and directions.

*Resolved*, That this Association recognize as regular practitioners of medicine, all who have been members of this Association, and have not forfeited their rights and privileges, and all members of State and County Societies, in full standing.'

The report was received, and taken up by sections. When the first resolution came up, a motion was made to amend, by striking out that part requiring an interval of three months to elapse between the termination of the first course and the commencement of the second; the objection being that the resolution, adopted as offered, would do an injustice to summer schools, whose sessions would have to begin three months after the closure of the winter sessions, in order to graduate students, thus throwing the session into July, August and September, and crowding upon the next winter session; and that such a course would drive students altogether from the summer schools.

Dr. McDowell, of Missouri, spoke in strong terms against the amendment. He despised the plan of some professors, who teaching at a winter school in the South, immediately the winter session closes, bring their half fledged brood to a Northern summer school, and there delivering a *second* course of lectures, foist their hastily hatched students upon the medical profession. He was entirely opposed to the practice of pushing and forcing, which was becoming so rampant.

The discussion was further participated in by Drs. Shattuck, of Boston, Austin Flint, N. Y., Brodie, of Mich., Palmer, of Mich., Morse, of Me., Atlee, of Pa., and others.

Dr. Jno. L. Atlee, of Philadelphia, would rather increase the interval to six months. Nor did he want, as others had suggested, to leave the matter to the discretion of the professors in the different schools. His experience proved that a man never becomes a thorough and proper student of medicine until *after he has attended his first course of lectures*, for he then learns what is required, and how he should direct his studies so as to profit by them; and as

he studies in the interval between the collegiate courses, the demonstrations of the previous winter reappear to him as he reads his text books, giving an interest to the study he could have sought for in vain before he had attended a course of lectures. He would rather have the course of instruction lengthened to eight or nine months, and have a less number of daily lectures. We wanted no student to have credit for attendance on more than one full course in one year, no matter how many regular courses he may have attended, and he moved to amend the amendment by striking out "an interval of three months," &c., and inserting, "and no student shall be credited for having attended more than one full course of lectures in any one year."

Dr. Palmer, of Michigan, said that many of the students he had met with voluntarily placed an interval of more than one year between their two courses of lectures. That they only became students in truth after attending one course of lectures, and they would be seen at college one winter and be missed the next, reappearing the third winter, when they would come forward and bear off the honors of the school.

Dr. Morse, of Maine, thought the appetite for legislation was too great. He wanted no restrictions to the aspirant for medical honors. He objected to the amendment as unjust to poor students, who would be forced to lose one year waiting for a degree that might have been employed in some pecuniarily profitable manner, if they were allowed, as they often do, to study two years before attending lectures, often while working at the same time for support, and then having saved the sum necessary to pay for their tickets attending two courses of instruction, one following directly upon the other, thus complying with the requisites of three years study and attendance on two full courses of lectures, even though they attend two full courses in one year.

A motion of Dr. Bennett, of Dansbury, Conn., to lay the whole matter on the table, was lost.

Dr. Johnson, of Mo., did not want the courses to follow too closely on each other. Apart from other considerations, such a course would crowd the student too much, and over-tax his powers of physical and mental endurance. Students required time for relaxation, whether they wanted it or not, and therefore he was in favor of a considerable interval between the courses, and only one course in a year.

Dr. Worthington Hooker, of New Haven, Conn., thought there was not too much actual instruction being crowded together that was to be avoided, but rather too much lecturing, which brings different subjects in too close connection before the minds of the students, and taxes their energies too much, and therefore he did not want the courses crowded on each other; nor did he want the lectures to be as crowded as they usually are. He stated that in the medical department of Yale College it was customary to make a distinction in the ability for receiving instruction, between medical students who had received the advantages of a previous classical education, and those who had not enjoyed this privilege; and that they considered classical students full one year in advance of the others, and that they made this distinction in their favor regarding the length of time required to be devoted to the special study of medicine. They only required two years application from classical students, while they exacted three years' study from all others. He firmly believed that a difference of one year should be made, but he would prefer the course of application to be extended one year longer in each case, thus making it three and four years' study instead of two and three, as it now is.

Dr. Atlee was here allowed to alter his amendment so it should read, "and no student shall attend a second course of lectures until a year shall have elapsed since the commencement of the first course."

Dr. Davies, of Illinois, thought that the design of the resolution had been generally misunderstood by the members of the Association. He considered that the great fault in medical education, which they were trying to discover and rectify, consisted in the laxity exhibited in exacting from each student of medicine s suitable amount of preliminary education. He wanted a previous education, and he knew that if energetic young men love the profession of medicine and desire to become enrolled among its votaries, they would take care to obtain the necessary education if they did not possess it; and those who did not think the profession worthy of this trouble, were much better out of it; and if the preliminary education was exacted, we should have an intelligent and educated body of physicians, and not be obliged to accept among us those of whose general literary attainments we are ashamed.

He also disliked the plan of delivering the same course of lectures to students of the first and second course. Those who had

studied medicine but six months could by no manner of means comprehend what was intended for students of three years standing; and it was folly to demand it of them. He wished the colleges to be so re-organized, that there should be a gradation of instruction according to the advance made by the several classes of students.

Dr. Reese, of N. Y., remarked, that as the winter schools closed in March, and the summer schools could not, by the resolution, begin in June, this would force students to employ in study the months of July and August which is the general period of relaxation from labor—and thus virtually, in a great measure, prevent graduation at the summer schools.

After some more discussion, the amendment of Dr. Atlee was adopted, when a motion was made by the opponents of the amendment, to lay the *resolution* on the table. This motion was lost, and finally, the *resolution, as amended, was adopted.*

Second resolution, adopted.

Third resolution, adopted.

The fourth resolution was amended by Dr. McCaw, requiring "that in those States where there are regular State Medical Societies, the delegates elected to be present at the examination of candidates for the degree of M. D., in all the medical schools of the State, should be selected from the members of the State society; in those States where there are no societies, the selection is to be made from members of the profession in good standing."

Dr. Jno. L. Atlee wanted no representation of examiners from any except State Medical Societies, which would force those States where they did not exist, to organize State Medical Societies, and therefore he opposed the amendment, though he favored the original resolution.

Dr. Storer, of Mass., wished no restrictions to be placed on medical schools.

Dr. Mussey, of La., wanted to have a resolution passed, providing for the examination of teachers before they were elected to professorships, and to pass no men but those who were known to be favorable to the ideas of the Association, regarding medical instruction.

Here a tumultuous clamor arose, during which the amendment was withdrawn, and the previous question called for and sustained; when the resolution was, upon call, again read, and finally adopted as originally reported.

The fifth resolution gave rise to a good deal of discussion as to the propriety and the right of placing medical schools under the censorship of the State Medical Societies.

Dr. Timothy Childs, of Berkshire, Mass., stated, that forty years ago he called for a board of examiners to be present at all examinations for a degree, and that he had never ceased to urge the propriety of so doing. He had never passed a student without such supervision.

He stated that he was the first man to introduce into medical colleges a Professorship on Pathology, and he was always in favor of enhancing the dignity and worth of his profession, and as long as he was able to raise his voice, he would oppose to the utmost all those who attempt to lower the standard of medical excellence, regardless of the motives that prompt them to do so.

Dr. Worthington Hooker, of New Haven, Ct., explained that Yale College, further back than forty years ago, had, of its own accord, adopted the plan contained in the resolution under consideration, and during his connection with the college, there had not been one whisper of disapprobation regarding it. There was harmony between the State Medical Society and the institution, which feels the genial effects of that harmony, which gives it its strength and position.

He thought that all medical colleges should be closely watched by the State Medical Societies of their respective States.

The resolution was adopted.

Sixth resolution adopted.

Seventh resolution adopted.

Eighth resolution adopted.

The ninth resolution was, after some little discussion, on motion, laid upon the table.

The whole report was then adopted and referred to the Committee on Publication, for publication in the forthcoming volume of Transactions.

The Committee on Nominations then reported the following appointments on standing and special committees, which was received and adopted, and the nominations accepted.

Committee on Medical Literature.—Frank H. Hamilton, N. Y., Edward Warren, Md., Chas. A. Lee, N. Y., J. W. C. Ely, R. I., E. H. Clark, Mass.

Committee on Medical Education.—Levin T. Joynes, Va., Christopher C. Cox, Md., J. C. Bradbury, Me., L. H. Steiner, Md., M. A. Patten, Mo.

On the Surgical Treatment of Strictures of the Urethra—Jas. Bryan, Pa.

On Drainage and Sewerage of Large Cities—their influence on public health—A. J. Semmes, La., C. Boyle and C. M. Dove, D. C.

On Puerperal Tetanus—its statistics, pathology and treatment—D. L. McGugin, Iowa.

On Aenemia and Chlorosis—A. P. Ayres, Ind.

On Alchohol and its Relations to Man—J. W. Dunbar, Md.

On Milk Sickness—Robert Thompson, Oramel Martin, Ohio, S. W. Bemis, Ky.

On Microscopic Observations on Cancer Cells—Geo. W. Norris, Pa.

On Blood Corpuscles—A. Sager, Mich.

On the Hygienic Relations of Air—C. C. Cox, Md., Chas. W. Parsons, R. I.

On Quarrantine—D. D. Clark, Pa., M. Snow, R. I., Wilson Jewell, Pa., E. D. Fenner, La., J. W. Houck, Md.

On Medical Ethics—Paul F. Eve, Tenn., J. A. Murphy, Ohio, M. L. Linton, Mo., R. S. Powell, Ga., B. F. Schenck, Pa.

On Tracheotomy in Membranous Croup—A. N. Dougherty, N. J., Geo. H. Gay, Mass., J. M. Minor, N. Y.

On the Effect of Perineal Operations for Urinary Calculi upon Procreation in the Male—J. S. White, Tenn., J. B. McCaw, Va., R. C. Foster, Tenn.

On Mercurial Fumigations in Syphilis—D. W. Yandell, Ky.

On the Cause and Increase of Crime, and its mode of Punishment—W. C. Sneed, Ky.

On the Microscope—R. C. Stiles, Vt.

On Gangrene of the Lungs—C. L. Allen, Vt.

On the relation which Electricity sustains to the Courses of Disease—Isaac Casselbury, Ind.

On the Morbid and Therapeutic Effect of Mental and Moral Influences—Alfred Hitchcock, Mass.

On the Causes of the Extinction of Aboriginal Races, more especially of the Red Men of America—Geo. Suckley, N. Y.

To report on the practical workings of the United States law relating to the inspection of drugs and medicines—E. R. Squibb,

New York, and F. Bowditch, Mass., Prof. Jos. Carson, Philadelphia.

On the Causes and Treatment of Un-united Fractures—E. K. Sanbone, and]

On Diptheria—Alonzo Clark, New York.

On the effect of stimulants in the treatment of fractures—John W. Russell, Ohio.

On dislocation of the hip and shoulder joints—Moses Gunn, Michigan.

To investigate the conditions demanded for a diploma of Doctor of Medicine in the various Medical Schools and Universities of Europe—J. Baxter Upham, Mass., Robert Thompson, Ohio, Geo. C. Shattuck, Mass.

In regard to the committee on the memorial to John Hunter, the following resolutions were adopted:

*Resolved*, That it be recommended to the different States to collect subscriptions of not more than one dollar each, from every regularly educated physician. All money so collected to be forwarded by the chairman of the committee hereby appointed, to the Treasurer of the Hunter Medical Fund in London.

*Resolved*, That Drs. Henry J. Bowditch, Mass.; Amos Nourse, Maine; George B. Twitchell, N. H.; Chas. Clark, Vt.; G. L. Collins, R. I.; Charles Hooker Conn.; Henry D. Bulkley, N. Y.; Wm. Elmer, N. J.; John L. Atlee, Pa.; James Cowper, Del.; C. C. Cox, Md.; J. B. McCaw, Va.; Cornelius Boyle, D. C.; James H. Dickson, N. C.; H. K. Frost, S. C.; R. D. Arnold, Ga.; John Nott, Ala.; G. A. Nott, La.; W. G. Williams, Mass.; C. A. Page, Mo.; J. B. Landsley, Tenn.; R. J. Breckenridge, Ky.; J. W. Russell, Ohio; A. B. Palmer, Michigan; Calvin West, Ind.; Patrick Gregg, Ill.; D. L. McGugin, Iowa; J. B. Douseman, Wis.; D. W. Hand, Minn. O, Harvey, Cal.; F. G. McSparack, Ark., be a committee to collect subscriptions.

A resolution was adopted to send a copy of the resolutions passed, to each Medical School in the country.

A resolution was adopted, directing that a seal of the Association be given to every Medical School in good standing, reserving the privilege of demanding the same upon sufficient evidence that the school had no longer claims to its possession.

It was moved, that in order to expedite business without a session next day, the sections meet at 2½ P. M., and at 4 P. M. the

Association again convene to close business and receive their reports.

CLOSING SESSION.

The Association was called to order at 4 P. M., Dr. Wilson Jewell, in the chair.

Various special committees were called upon to report, and failing to do so were discharged—other reports which had been placed on the Secretary's table were, without reading, on motion, referred to the committee on publication, with power to act.

The various sections were called upon for their reports, and the various papers respectively discussed by them were referred to the Committee on Publication.

The report of the Committee on Rules of Order, lying on the table, was then called for and read, and the order of business acted upon, and the articles severally adopted, and afterwards the whole report was laid on the table.

A communication was read from the Essex County Medical Society, of the State of New Jersey, containing the following preamble and resolution, for action upon by the Association:

*Whereas,* The indiscriminate sale of poisonous drugs, at retail, is fraught with danger to the community; be it

*Resolved,* That, in the opinion of this Association, it is the duty of the public authorities in the different States of the Union to pass prohibitory laws against the retailing of morphia, strychnia, prussic acid, etc., except on the written prescription of a regular practitioner of medicine, or on the personal application of a well-known citizen; and that a committee be appointed in the different States to carry into effect the spirit of the resolution.

The paper was received, and the resolution adopted.

The report was referred to the Committee on Publication, with power to act.

On motion of Dr. Davis, of Ill., it was decided that the committee called for be appointed at his leisure by the President of the Association.

On motion, Dr. Cox, of Md., was requested to present at the next meeting of the Association a paper on Necrology.

Dr. A. N. Dougherty, from the Committee on Tracheotomy, reported that from the mass of facts they had gathered with regard to the result of this operation, the proportion of successful operations

was 1 in $3\frac{4}{10}$. The statistics of cases in this country, as far as ascertained, was 17 cures out of 58 cases.

Trousseau before 1844 had 212 cases, of which there were 40 cures and 132 deaths; after 1848, he had in 49 cases 48 deaths. From 1849 to 1858, he had at the Children's Hospital, at Paris, 466 cases, which resulted in 126 cures and 340 deaths. Another operator met with but 4 cures in 36 cases. Statistics of other operators were presented, and at the request of Dr. Dougherty, the report was referred back to the committee, with power to complete the report, and present the same at the next meeting of the Association.

Dr. Bell, of Brooklyn, offered the following resolution:

*Whereas*, Some of the papers submitted to this Association require a longer period of time for their examination than the annual meetings admit of; therefore, be it

*Resolved*, That the several sections have power to refer such papers to experts, who shall determine whether they are worthy of being referred to the Committee on Publication, for publication in the transactions.

On motion, this was laid over to the next meeting of the Association.

A motion of Dr. Chapin, that all papers which had not been disposed of by the sections, should be referred by the Committee on Publication to experts, who should report back to them whether the papers were worthy of publication in the transactions, was laid on the table.

Various rules of order and amendments to the constitution, which had laid over from previous meetings, were again indefinitely postponed.

A communication from the Clinton County Medical Society of Iowa, to which was appended a catalogue of the college, was read.

This communication charged the Western Reserve College with having exceeded its rights and privileges, in conferring the degree of the doctorate upon one Freeman Thompson, who had not come up to the requirements of their curriculum, who had not been examined by the professors in the presence of censors, and who had not been in attendance on lectures, since the session of 1848–9 a single day. It stated that at one time the Western Reserve College acknowledged the truth of the above charge, and at another time denied it.

They called the attention of the Association to this case, and desired that the Western Reserve College be refused representation in the Association. Various papers were appended to the communication, substantiating the truth of the facts mentioned.

A motion was made to refer the whole subject to a select committee of three, to be appointed hereafter by the chairman, who should report on the same at the next annual meeting of the Association.

Dr. Davis, of Illinois, reminding the mover of the existence of a permanent Committee on Medical Ethics, created for just such purposes, the motion was altered to refer the matter to the Committee an Medical Ethics, with instructions to report at the next annual meeting, and carried.

A communication was read from the Legislature of Connecticut, stating that the Judiciary Committee had under consideration their memorial on Criminal Abortion, and asking, in order to further the matter, that a committee be appointed by the Association to frame a bill meeting the exigencies of the case, to be presented for due consideration of the Legislature.

It was moved and carried that the chair appoint a proper committee to draw up such a bill as would meet the views of the Association, and present the same to the Legislature of the State.

A motion was made to alter the time of meeting from June to May, so that if the Association desire to meet in 1862, in New Orleans, they could do so before the time when yellow fever occurs. This being an amendment to the constitution, was laid over for one year.

On motion of Dr. S. W. Butler, of Philadelphia, it was resolved that this Association request the Convention of Medical Teachers to be perpetuated in connection with the American Medical Association, and meet in conference the day previous to the annual meetings of the Association, and report to the same.

On motion, the same committee appointed last year was continued, any vacancies occurring to be filled by the President.

On motion of Dr. J. L. Atlee, of Philadelphia, the chairman of the Committee on the Memorial to John Hunter was empowered to fill any vacancy which may occur in that committee.

A motion by Dr. Mason, of New York, that a committee of five be appointed to prepare rules of order for the Association, and to report them at the next annual meeting, was laid on the table.

A communication from Elmyra, N. Y., was read, advising the offer of a prize for the best essay on the application of mechanical contrivances in the practice of surgery, having reference to the cure or alleviation of hernia, stricture of the urethra, stone in the bladder, fractures, dislocations, &c., was referred to the surgical section of next year.

A vote of thanks was passed to the retiring officers, for the efficient manner in which they had performed their duties.

A resolution was passed to the effect that the thanks of the Association are due to the Faculty of Yale College, the medical profession, and the citizens of New Haven, for the elegant hospitality tendered to the Association; and to the proprietors of the different manufactories, for the generous manner in which they welcomed the delegation to inspect whatever of interest their factories embraced; and to the railroad and steamboat companies, who have reduced their fare on the respective routes, in favor of the delegates to this Association.

Various amendments to the constitution, laid over from last year, were called up and indefinitely postponed.

Dr. Lewis A. Sayre, of New York, offered a resolution that the Smithsonian Institute be asked to collect all the medical literature that has appeared in this country, and is scattered in various journals and periodicals, and collect it in a general library for the purposes of the profession.

On motion of Dr. Davis, of Ill., the Association went into a committee of the whole, to consider the report of the Committee on Medical Education, Dr. Askew, of Delaware, in the chair. An animated discussion ensued as to the extent of preparatory qualification which ought to be exacted from young men designing to commence the study of medicine, but no conclusion being arrived at the committee rose and reported that they had considered the above report, but had no suggestions to make to the Association, and recommended the resolutions to the Committee on Publication.

Dr. Hamilton, of Brooklyn, N. Y., moved the adoption of a resolution to devise a plan for the organization of a College, or Board of Examiners, to be called the College of Physicians and Surgeons of the American Medical Association, in order to arrest all legislation which has reference to medical schools, and to determine what shall be the prerequisites to a degree of doctor of medicine. Said

College to consist of one member from each State, and to meet annually, immediately before the annual meetings of the Association.

Dr. S. W. Butler, of Philadelphia, stated that the whole plan in detail, only under a different name, had been brought before the Association at a previous meeting.

Dr. Cox, of Maryland, was exceedingly surprised at the idea of such a suggestion, and spoke against it in bitter terms, though at the same time he urged the necessity of a proper preliminary education for medical students.

Dr. Thompson, of Ohio, said that the asserted prerequisites for a degree in reference to preliminary education, established twenty years ago, were always disregarded in his State.

After some general discussion on this subject, the Association, on motion, adjourned *sine die*.

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*Meeting of the Ohio State Medical Society.*

OHIO WHITE SULPHUR SPRINGS,
June 12th, 1860.

Society met in the Hall, in the Grove of the Ohio White Sulphur Springs, and was called to order by the President of the Society—Dr. L. Firestone.

Dr. McMillen, from the Executive Committee, offered the following report:

The executive Committee of the Ohio State Medical Society, recommend the adoption of the following order of business:

The hours of meeting shall be 9 o'clock A. M. and 2 o'clock P. M.

1st. Report of the Committee on Admissions. 2d. The election of new members. 3d. Annual election of officers. 4th. Valedictory of President. 5th. Reports of standing committees. 6th. Reports of special committees. 7th. Miscellaneous business. 8th. Volunteer reports.

Dr. Baker moved that the report be adopted. Carried.

Dr. Pomerene being the only member of the committee on Admissions present, the chair appointed, to fill the vacancies, the following gentlemen: Drs. Thomas, Hurxthall, Miller and Conklin.

Dr. Baker moved that a committee be appointed to nominate permanent officers.

Dr. Murphy moved (in amendment) that the candidates be nominated in open society, and elected by ballot.

Dr. Kincaid moved (in amendment) that the committee be instructed to report the names of candidates.

Dr. Baker moved to lay the subject on the table; which was lost.

Dr. Kincaid withdrew his amendment, and, with leave of Dr. Murphy, moved that the rule adopted last year be adopted as the rule of this year; which was carried, and is as follows:

Candidates for the several offices shall be nominated in open society, and balloted for; and should no one on the first ballot receive the constitutional majority (when there are three or more candidates), the one who has received the smallest number of votes shall be dropped on each succeeding ballot, until a choice is made.

Dr. Pomerene, from the Committee on Admissions, reported the following gentlemen for membership, who were duly elected:

Drs. David Noble, Sugar Tree Grove; Samuel Hart, Marietta; S. L. Wright, Bellefontaine; L. W. Moe, Gilboa; J. L. Mount, Morrow; John W. Thompson, Columbus; N. Dalton, Logan; B. Raymond, Carroll; J. M. Southard, Marysville; J. L. Brenton, North Georgetown; Wm. A. McCulley, Lewis Centre.

The Society proceeded to the election of officers for the ensuing year, with the following result:

President—H. S. Conklin, M. D.

Vice-Presidents—R. R. McMeens, of Sandusky; S. Bonner, of Cincinnati; W. P. Kincaid, of Neville; S. P. Hunt, M. D., of Morrow.

Secretaries—W. W. Dawson, M. D., of Cincinnati, and R. Gundry, M. D., of Dayton.

Treasurer—John B. Thompson, M. D., of Columbus.

Librarian—Robert Thompson, M. D., of Columbus.

Committee on Admissions—Drs. Mullen, New Richmond; Hurxthal, Massillon; Pomerene, ———; Weber, Cleveland; Miller, Wooster.

The chair appointed Drs. Hamilton and Kincaid to conduct the President elect to the chair.

Dr. Conklin, on assuming the duties of President, thanked the members for the honor conferred, and trusted that they would give

him their assistance and support in the arduous duties of the post.

On motion of Dr. Kincaid, the valedictory address of the retiring President was made the order of the day for Wednesday, at nine o'clock A. M.

Dr. Loving, Chairman of the Committee on Publication, made a report as to the publishing of the Transactions of last year; which was accepted.

Dr. Thompson, as Treasurer for the past year, made his annual report on the finances of the Society.

The report was, on motion of Dr. McLean, referred to the Finance Committee.

On motion of Dr. Kincaid it was

*Resolved*, That the thanks of this Society are hereby tendered to the retiring officers, for the able and dignified manner in which they have discharged their several duties.

The President appointed the following Finance Committee:

Dr. E. B. Stevens, A. Metz, Menton, McLean, and Rogers, of New Richmond.

The Society took a recess until 2 o'clock P. M.

TWO O'CLOCK P. M.

Society resumed its session after recess. Dr. Conklin, President, and Drs. McMeens, Bonner, Kincaid and Hunt, Vice-Presidents, took their places on the platform.

Dr. A. H. Baker, Chairman of Committee on Surgery, delivered a synopsis of his report on Surgery.

Drs. Weber, Murphy and McLean participated in the discussion which ensued.

On motion of Dr. R. J. McLean, the report was laid on the table.

Dr. Pomerene, from the Committee on Admissions, reported in favor of the admission of Dr. C. Rathburn, of Marysville, to membership; which was adopted.

Dr. M. B. Wright, Chairman of Committee on Obstetrics, made an interesting report on topics embraced in that department of medicine.

An interesting discussion took place by Drs. Kincaid, Hamilton and Murphy.

On motion of Dr. Kincaid, the report was referred to the Committee on Publication, with instructions to print.

On motion of Dr. Landon, the Society adjourned until the next morning.

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WEDNESDAY, June 13, 1860.

Society met pursuant to adjournment, Dr. H. S. Conklin, President, in the chair.

Committee on Admissions, Dr. Mullen, reported the following gentlemen as qualified to become members:

T. B. Williams, Delaware; Isaac Miranda, New Carlisle; J. L. Abbott, Sidney; G. W. Weeks, Bloomville; S. R. Blizzard, Bellefontaine; —— Stephenson, Leesburg.

On motion of Dr. Bœrstler, the report of committee was adopted, and the gentlemen elected as members.

A copy of the Transactions of the Illinois State Medical Society was presented to this meeting, through T. K. Edmiston, M. D., of Clinton, De Witt county, Illinois; also, a certificate accrediting said Dr. T. K. Edmiston as a delegate to represent the Illinois State Medical Society in this meeting of the Ohio State Medical Society.

Dr. Brown, of Bellefontaine, offered the following resolution, which was adopted:

*Resolved*, That the acceptation of the Transactions and certificate aforesaid, be acknowledged and entered upon the minutes of this meeting, and that our Treasurer be directed to transmit a copy of the transactions of this meeting to the Secretary of the Illinois State Medical Society, and one to Dr. T. K. Edmiston, as their representative.

The Society proceeded to the order of the day, when

Dr. Firestone delivered a very able and interesting valedictory address.

On motion of Dr. Thompson, the address was referred to committee on Publication, with instructions to print the same in the transactions.

Dr. E. B. Stevens introduced to the Society, as visiting physicians from Indiana, Dr. Kitchen, of Indianapolis, and Dr. Horton, of Richmond, who were accorded the privileges of the floor, and invited to take part in the deliberations of the Society.

Dr. C. P. Landon, chairman of committee on Obituaries, presented his report, which gave an interesting account of the professional services of Dr. H. A. Ackley, of Cleveland, who died during the past year.

On motion of Dr. Allen, said report was referred to Publication committee, with instructions to print.

Dr. McMeens, chairman of committee on *Cannabis Indica*, reported at length on the history and therapeutic value of that agent.

On motion of Dr. W. W. Dawson, the report was referred to the Publication committee, with instructions to print.

Remarks were made on the report by Drs. Gundry, McMeens, Horton, Murphy, Allen, Kincaid, Firestone, Gaston, and Hill.

Dr. E. B. Stevens, chairman of Finance committee, presented the report of that committee:

OHIO STATE MEDICAL SOCIETY,
June 12, 1860.

The Finance committee report that they have examined the books and accounts of the Treasurer, and find them correct. They therefore recommend the reception and adoption of his report.

They also recommend that the assessment for 1860 be one dollar.

Respectfully submitted,

E. B. STEVENS,
S. G. ROGERS,
R. G. MCLEAN,
A. METZ,
Finance Com.

Which report was accepted and adopted.

On motion of Dr. Gundry, the Society took a recess until 2 o'clock.

TWO O'CLOCK, P. M.

The Society resumed its session.

Dr. Pomerene, from the committee on Admissions, reported in favor of the application of Dr. S. Bailey, of Flushing, Belmont county, who was thereupon duly elected a member.

Dr. E. B. Stevens, chairman of committee on Medical Literature, read a report upon that subject, which, on motion of Dr. Kincaid, was referred to committee on Publication, with instructions to print.

Dr. A. Metz made his report upon Diseases of the Eye, which received the same reference.

Dr. Crane, one of the delegates from this Society to the National Medical Association, gave an interesting account of the late meeting of that body at New Haven, Conn.

Dr. Armor, chairman of the committee on Prize Essays, made a verbal explanation of the reasons that no report was forthcoming on that subject.

Dr. Pomerene, from committee on Typhoid Fever, read his report on that disease, which was referred to committee on Publication, with instructions to print.

Dr. T. L. Wright, of Bellefontaine, read a volunteer paper upon "The influence of chloroform upon the intellectual processes, or an inquiry concerning the credibility of testimony relating to transactions, occurring to a mind partly unconscious," which, on motion of Dr. Bœrstler, was referred to committee on Publication, with instructions to print.

On motion of Dr. Kincaid, the Society adjourned.

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THURSDAY, June 14, 1860.

Society met pursuant to adjournment.

Dr. Mullen reported in favor of the admission of Dr. G. C. Blackman, of Cincinnati, who was duly elected to membership.

Dr. Stevens introduced to the Society Dr. Parvin, delegate from the Indiana State Medical Society, who was welcomed by the chair (Dr. Kincaid), and invited to participate in the future proceedings. Dr. Parvin replied in a short and appropriate speech.

Dr. Landon offered the following resolution, which was unanimously adopted:

*Resolved*, That when this Society adjourn, it adjourn until the second Tuesday of June, 1861, to meet at the Ohio White Sulphur Springs.

Dr. Mullen, from committee on Medical Societies, reported that the Union Medical and Surgical Society of Alliance desired to become an auxiliary of this Society, and had forwarded a copy of their constitution and by-laws. The committee therefore recommended that said Society should become an auxiliary to this Society.

Dr. Mullen moved the adoption of the report.

Dr. Murphy moved the following amendment:

*Resolved*, That the Union Medical and Surgical Society be requested to strike out the clause in the by-laws admitting female physicians to membership in their Society.

Dr. Carey moved to lay the report on the table, which was negatived.

Dr. Hill moved to indefinitely postpone, which motion was lost on division.

Dr. McDermott moved to refer the application of the said Society, with pending resolution, to special committee, with instructions to report to-day.

Dr. Thompson moved the following amendment:

To recommit the report to committee on Medical Societies; which was carried.

Dr. Sinnet stated that a discrepancy existed in his account with the Treasurer, he not having received credit for certain assessments not due.

On motion of Dr. Murphy, the account of Dr. Sinnet was referred to the Finance committee and the Treasurer.

The Treasurer read a long list of members in arrears for assessment of more than four dollars each, amounting in the aggregate to more than nine hundred dollars.

On motion of Dr. McDermott, it was

*Resolved*, That all claims due the Society after the first of October, 1860, shall be placed in the hands of a lawyer, for collection.

Dr. Baker offered the following:

WHEREAS, It is believed by many members of this Society, that sometimes membership is sought for no other purpose than to give more prominence to the applicant, and that thereafter he neglects all duties in connection with the Society, showing clearly and conclusively that the God of Mammon has more influence over his actions than the love of the profession or those confided to his care, and

WHEREAS, Such individuals are a dead weight upon the Society, therefore,

*Resolved*, That any member absenting himself from the deliberations of this Society for three consecutive years without paying his annual dues and not offering a valid excuse be *expelled* from the Society.

*Resolved*, That *five* years absence from the meetings of this So-

ciety, notwithstanding he may have paid his dues, shall be considered sufficient cause for expulsion, unless otherwise provided for.

*Resolved*, That when a member of this Society shall have lived out the time allotted to man, *three score and ten years*, he shall be exempt from the payment of dues, and thereafter be considered an honorary member with all the privileges of a member and to be entitled to a copy of the proceedings of the Society so long as he may live; provided always, he may not object to the conferring of the honor intended.

A division of the subject having been had, the preamble and first resolution were adopted; the second and third resolutions were rejected.

Dr. Caruthers moved that Dr. Gundry be requested to forward to the Publication Committee the report on Insanity, read by him before this Society last year. Adopted.

On motion of Dr. Hurxthal, it was

*Resolved*, That the Librarian be authorized to deliver any number of extra pamphlets or addresses in his possession, to members of the Society applying therefor, on their paying the postage on the same.

Dr. C. P. Landon offered the following resolution:

*Resolved*, That a medal of the value of $50, with an appropriate inscription, be offered by this Society and awarded to the author of the best essay, by a member of the Society. The determination of merit, the subject of the essay, and the regulations of competition to be made by a committee hereafter appointed; their award to be made before the next meeting of this Society. Which was adopted.

On motion of Dr. Weber, it was

*Resolved*, That the author of any accepted paper read before this Society, be permitted to publish a copy of such paper in any one of the Medical Journals of the State.

Dr. Morehead, from the committee on Medical Societies, presented the following report:

The committee on Medical Societies, to whom was referred the constitution and by-laws of the "Union Medical and Surgical Society" of Alliance, requesting admission as auxilliary to this Society, beg leave to report, that the requirements of their by-laws, regulating the admission of members, not being in compliance with

the requisitions of this Society, advise the rejection of the application.

WASH. MOOREHEAD,
T. J. MULLEN.

Dr. Moorehead thereupon moved the adoption of said report, which was carried.

Dr. Wilson of Sidney, offered the following:

*Resolved*, That a committee be appointed, to report at the next annual meeting of the Society, on Obstetrical Instruments and Surgical Obstetrics.

And so it was ordered, and the chair appointed as such committee, Drs. Wright and Wilson.

Dr. McMillen offered the following resolution:

*Resolved*, That the Governor of this State be requested to call the attention of the Legislature to the so called "cattle disease," at present prevailing in New England, and recommend the appointment of a medical board for the purpose of investigating its pathology and treatment, and the best method of preventing its introduction into our State.

*Resolved*, That the Secretary be instructed to furnish the Governor with a copy of the above resolution.

A discussion took place between Drs. Baker, Wright, Crane and McMillen, after which the resolution was adopted.

Dr. Reeves had permission to read a paper entitled "A Report of three cases of diseases of the neck of the Uterus."

Dr. Boerstler moved that the paper be referred to the Publication Committee, with instructions to print, which was adopted after remarks on the paper by Drs. Baker, Reeves, Murphy, Taggart and W. W. Dawson.

On motion, the Society took a recess.

TWO O'CLOCK P. M.

The Society resumed its session.

Dr. E. L. Hill offered the following for adoption:

WHEREAS, Mr. Andrew Wilson, Jr., the proprietor of the Ohio White Sulphur Springs, has, at considerable trouble and expense, fitted up a commodious hall for the special accommodation of the Ohio State Medical Society at its present annual meeting, and in every way within his power has contributed so much to render the

deliberations of the society pleasant, and the sojourn of the members and their families agreeable, therefore,

*Be it resolved*, That the members of the Ohio State Medical Society do hereby tender to Mr. Wilson their sincere and heartfelt thanks for his efforts in their behalf; for the spacious, airy, and well-arranged hall, in the midst of one of most beautiful groves in the State, which he has placed at their disposal for their sessions; for the uniform courtesy and kindness received at his hands and of all connected with the Springs; and for the innumerable evidences they have witnessed of his peculiar adaptedness to render the Ohio White Sulphur Springs one of the most popular, as its natural advantages have already made it one of the most charming and lovely watering places in the country.

Which resolution was unanimously adopted by a rising vote.

Dr. Landon moved that the thanks of the society be voted to Henry Dinsmore, Esq., the reporter for the Cincinnati Gazette, for his faithful report of the proceedings of this meeting. Adopted.

Dr. Carey moved that the publication committee be requested to publish the names of all members. Adopted.

On motion of Dr. Murphy, it was

*Resolved*, That the Publication Committee be requested to publish one thousand copies of the valedictory address of Dr. Friestone.

The chair announced the following committees:

STANDING COMMITTEES.

Executive.—H. G. Carey, of Dayton; S. Bonner, of Cincinnati; W. L. McMillen, of Columbus; G. C. E. Weber, of Cleveland; W. P. Kincaid, of Neville.

Publication.—R. Gundry, of Dayton; W. W. Dawson, of Cincinnati; R. Thompson, of Columbus; John H. Rodgers, of Springfield; T. B. Williams, of Delaware.

Finance.—E. B. Stevens, of Cincinnati; A. Metz, of Massillon; R. G. McLean, of Lockbourne; J. G. Rodgers, of New Richmond; A. Wilson, of Sidney.

Medical Ethics.—W. Morehead, of Zanesville; A. C. McLaughlin, of Tremont; T. L. Wright, of Bellefontaine; A. Dunlap, of Springfield; F. T. Hurxthal, of Massillon.

Medical Societies.—G. F. Mitchell, of Mansfield; W. Judkins, of Cincinnati; T. J. Mullen, of New Richmond; W. Morehead, of Zanesville; W. F. Wilson, of Ironton.

SPECIAL COMMITTEES.

Surgery.—G. C. Blackman, of Cincinnati; W. L. McMillen, of Columbus; C. McDermott, of Dayton.

Obstetrics.—J. D. Cotton, of Marietta; G. W. Bœrstler, of Lancaster; P. Allen, of Kinsman.

Diseases of the Eye.—A. Metz, of Massillon.

Obituaries.—L. Firestone, of Wooster; J. Crane, of Ashland; J. Delamater, of Cleveland.

Practice.—John A. Murphy, of Cincinnati; C. P. Landon, of Westerville; E. Gaston, of Morristown.

Prize Essays.—M. B. Wright, of Cincinnati; S. G. Armor, of Dayton; R. Rodgers, of Springfield.

Obstetrical Surgery.—M. B. Wright, of Cincinnati; A. Wilson, of Sidney.

Insanity.—R. Gundry, of Dayton.

Medical Literature.—S. G. Armor, of Dayton; E. L. Hill, of Oxford; M. Effinger, of Lancaster.

Diptheria.—W. W. Dawson, of Cincinnati; D. Noble, of Sugar Tree Ridge; S. Hart, of Marietta.

Scarlatina.—T. L. Wright, of Bellefontaine.

On the Microscope.—G. C. E. Weber, of Cleveland.

Uterine Diseases.—G. W. Bœrstler, of Lancaster.

Laryngeal Phthisis.—R. R. McMeens, of Sandusky.

Dr. Murphy presented the following resolution:

*Resolved,* That the President appoint a committee of five to collect statistics in regard to eating opium and other narcotics, to report at the next meeting.

The motion was carried, and the President appointed, to serve on such committee, the following gentlemen: Drs. C. G. Comegys, of Cincinnati; S. Loving, of Columbus; J. Davis, of Dayton; J. P. Kirtland, of Cleveland; R. R. McMeens, of Sandusky.

Dr. E. B. Stevens, from the Committee on Finance, submitted the following:

The Finance Committee report, in reference to the case of Dr. Sinnett, that we find the payment of the annual assessment for the years 1856 and 1859 in dispute; and after a careful examination of all the circumstances, we cannot regard the evidence of such payments satisfactory, though we have no intention in this of

calling into doubt the veracity of either of the parties interested. In view of the special circumstances of the case, however, we recommend the assessment for 1859 to be declared remitted.

E. B. Stevens,
J. G. Rogers,
A. Metz,
Finance Com.

Which report was, on motion, accepted, and the committee discharged from all further consideration of the subject.

On motion of Dr. Hurxthal, it was

*Resolved*, That the Secretary be authorized to issue certificate of appointment, as delegate of this Society, to the Indiana, Kentucky or Illinois Medical Society, to any member of this Society who may be within either of these States during the meeting of such Society, and may desire such appointment.

Dr. Landon moved that the thanks of this Society be given to the presiding and other officers of this Society, for the care and impartiality with which they have discharged their duties during the present meeting.

The motion being put by the mover, it was carried.

On motion of Dr. McDermott, it was

*Resolved*, That the thanks of this Society be voted to those railroad companies who have so generously offered to convey members attending this meeting at half fare.

Dr. Landon gave notice of an amendment to the by-laws, to the effect that the annual assessment may, if deemed necessary, exceed one dollar, the present limit.

Laid over until next meeting, under the constitutional rule.

The Secretary (Dr. Dawson) laid before the Society a letter from Dr. Mitchell, of Mansfield, regretting his inability to attend this meeting, and inclosing the Report of the Committee on Medical Societies; also an invitation to the Society to hold its next meeting at Mansfield.

On motion, the said report was referred to the Publication Committee, with discretionary power to print or otherwise.

On motion of Dr. Dawson, the Society adjourned.

## *National Convention for Revising the Pharmacopœia of the United States.*

This convention held its fifth decennial meeting in the city of Washington on the 2d of May, 1860.

Dr. Geo. B. Wood, the president of the convention of 1850, was called to the chair, and Dr. Jno. C. Riley of Washington, appointed Secretary, pro tem.

A committee of five were appointed to nominate permanent officers, which reported the following:

*President.*—Dr. George B. Wood, of Philadelphia.

*Vice Presidents.*—Dr. Jacob Bigelow, of Boston, and Dr. Edward Warren of North Carolina.

*Secretary.*—Dr. Thomas Miller, of Washington.

*Assistant Secretary.*—Dr. J. C. Riley, of Washington.

Which report was adopted.

A committee on credentials were appointed, who reported the following delegates as present, viz:

From the College of Physicians and Surgeons of Philadelphia—Dr. George B. Wood and Dr. Robert Bridges.

From the New York State Medical Society—Dr. Caleb Green and Dr. E. R. Squibb.

From the New York Academy of Medicine—Dr. E. R. Squibb.

From the College of Pharmacy of the City of New York—John Meakim and William Hegeman.

From the Philadelphia College of Pharmacy—William Proctor, jr., A. B. Taylor and Edward Parrish.

From the Maine Medical Association—Dr. A. J. Fuller and Dr. H. T. Cummings.

From the Connecticut State Medical Society—Dr. George W. Russell.

From the Massachusetts Medical Society—Dr. Jacob Bigelow and Dr. Ephraim Cutter.

From the Jefferson Medical College—Dr. Franklin Bache.

From the University of Pennsylvania—Dr. Joseph Carson.

From the Medical Society of the District of Columbia—Dr. Thomas Miller and Dr. William G. Young.

From the National Medical College—Dr. John C. Riley and Dr. M. S. Lincoln.

From the University of Maryland—Dr. William E. A. Aiken.

From the Maryland College of Pharmacy—Alpheus P. Sharp.

From the United States Army—Dr. Lewis A. Edwards.

From the United States Navy—Dr. George Clymer.

The Report of the Revising and Publishing Committee, appointed in 1850, was read and referred to the Committee on Auditing Accounts of the Secretary and Assistant Secretary.

It was, on motion, resolved that such members of the two houses of Congress as are medical graduates be invited to attend the Convention and participate in its deliberations.

The delegates of several medical bodies represented in the Convention were then called on for contributions towards a revision of the National Pharmacopœia, when reports were handed in from the Massachusetts Medical Society by Drs. Cutter and Bigelow; from the New York State Medical Society, by Dr. Squibb; from the New York Academy of Medicine, by the same; from the New York College of Pharmacy, by William Hegeman, and from the Philadelphia College by William Procter, jr.

Mr. Parrish presented a report from the American Pharmaceutical Society, a body not incorporated and not represented in this Society; which was received.

These reports were referred to a committee, with directions to report a plan for the revision and publication of the Pharmacopœia; the committee to consist of Dr. Franklin Bache, Mr. Edward Parrish, Alpheus P. Sharp, Dr. Thomas Miller, and Dr. George W. Russell, of Connecticut.

The Convention then adjourned until 11 o'clock to-morrow.

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THURSDAY, MAY 3D, 1860.

At 11 o'clock the chair was taken by Dr. George B. Wood, of Philadelphia, the President of the Convention.

The minutes of the meeting of the preceding day were read by Dr. Thos. Miller, the Secretary.

Mr. Procter, from the Committee on Credentials, reported the presence to-day of the following gentlemen, additional to those present yesterday: from the Delaware State Medical Society, Dr. F. H. Askew; from the Maryland College of Pharmacy, Mr. Geo. W. Andrews; from the Massachusetts College of Pharmacy, Messrs. Charles T. Carney and Robert R. Kent; and from the New York College of Pharmacy, Alex. Cushman.

Dr. Miller, from the Auditing Committee, stated that the report of the Revising and Publishing Committee appointed in 1850 has been examined and found correct.

Dr. Bache, from the Committee on a Plan for the Revision of the Pharmacopœia, brought in a report comprising a series of resolutions, one of which was that there should be a committee of nine (Dr. Wood to be one) to revise and publish the Pharmacopœia; also, that three be a quorum, and that the place of meeting be in Philadelphia.

On motion of Dr. Miller, the report was considered resolution by resolution, and was passed.

On motion of Mr. Meakim, it was resolved that a committee be chosen from each State and Territory represented, ten in all—to nominate eight members of the committee on revision and publication of the Pharmacopœia.

On motion of Dr. Bache, a recess of ten minutes, to confer with the President on the subject of appointing the Nominating Committee, was had, after which the meeting resumed, and the Chair gave the names of the Committee.

On motion of Dr. Bache, a committee of five, to be appointed by the Chair, should be charged with the duty of reporting on a plan for organizing the convention of 1870.

The committee thus constituted consisted of Drs. Bache, Squibb, Miller, Andrews and Carson.

A recess of fifteen minutes was taken to allow the two committees to consult and report.

On coming again to order, Dr. Askew read the report of the Nominating Committee, which proposed for the Committee on Revision and Publication of the Pharmacopœia, the following gentlemen:

Dr. Franklin Bache, of Philadelphia; Dr. E. R. Squibb, of New York; Dr. C. T. Carney, of Massachusetts; Dr. Geo. B. Wood, of Philadelphia; Dr. H. T. Cumming, of Maine; Mr. Wm. Procter, of Philadelphia; Mr. Jos. Carson, of Philadelphia; Mr. Wm. S. Thompson, of Baltimore; and Mr. A. B. Taylor, of Philadelphia.

The report was accepted, and its nominations confirmed.

The committee to make arrangements for the convention of 1870 reported through its chairman, Dr. Bache, that the same rules as adopted in 1850 for the present convention be taken, by simply changing dates.

This report was adopted.

Mr. Wm. Hegeman, of New York, moved to ask an expression of the opinion of the Convention in reference to the subject of a bill now before Congress, to provide for the greater security of the medical profession and the public in the matter of importation of drugs and medicines.

Dr. Bache, whilst acknowledging the great importance of the matter, deemed it not germane to the objects of this Convention, and therefore moved to lay the subject on the table; which was accordingly done.

Mr. Meakim called the attention of the convention to a proposition of the New York College of Pharmacy, which he embodied in a resolution, and moved—

That in the index of the Pharmacopœia, the syllables of both Latin and English names be so divided and accented that the index may also serve as a pronouncing vocabulary to the Materia Medica; which, after discussion, was adopted.

Mr. Meakim next called the notice of the convention to its title of the "National Medical Convention,' &c., &c., and moved to change to "The Pharmacopœia Convention."

Dr. Bache proposed merely to strike from the present name the word "Medical;" which was put to the vote and carried unanimously.

So the convention will be called "The National Convention for Revising," &c., &c.

On motion of Mr. Procter, a contribution was then made by each of the members present, to defray the expenses of the convention.

The President took the opportunity to explain that the vote on the resolution of Mr. Meakim was merely a recommendation to the Committee on Revision and Publication, and not an instruction.

Mr. Procter spoke in favor of having a low-priced edition of the Pharmacopœia for more general distribution among pharmaceutists, which would do much to insure uniformity of preparation of medicines, &c.

The subject was discussed by the President, Dr. Bache, and Mr. Procter, when the matter seemed to be remitted to the discretion of the Committee on Revision, who were stated by the President to be always anxious to furnish an edition at the lowest price at which it could be done.

Dr. Parrish introduced the subject of uniformity of weights and

measures by the medical profession and by the apothecaries of the country. He advocated making the avoirdupois ounce the standard of weight, as was advocated in England.

The president thought the convention could not discuss this subject with profit in the short time allotted to it.

Mr. Meakim thought it best to begin now if anything was to be done in the future.

Dr. Bache called up Mr. Taylor, of Philadelphia, who had written with much learning and effect on this subject.

Mr. Taylor then addressed the Convention in advocacy of abolishing the troy and avoirdupois scales now in use, and substituting the grain as the unit for all weights less than a pound avoirdupois; beyond that he would use pounds. He would also do away with the Roman symbols, and use the common Arabic figures. He thought this better than the plan now proposed in Great Britain.

Dr. Squibb read an extract from the united proceedings of the New York Academy of Medicine and the New York College of Pharmacy on this subject.

Mr. Parrish advocated the abolition of the present anomalous weights, and was in favor of the avoirdupois ounce and pound.

Mr. Procter also favored the avoirdupois measure as the only one to be used.

Dr. Bache thought it better, for the sake of uniformity, to wait the action of the British commissioners on the subject of the consolidation of the London, Edinburgh, and Dublin Pharmacopœias into a British Pharmacopœia. He was himself against changing the troy grain, and hoped the British commissioners would not. He preferred the French system of *grammes, centigrammes*, doing away the *decigrammes;* but as there was little hope of this system being adopted in Great Britain, it would be best to wait and see what was done there before we act.

Mr. Meakim advocated the "grain" standard.

Mr. Parrish preferred the ounce.

Mr. Procter said that even in France now, in many of their best works on pharmacy, they reject the decimal division, and go back to the old ante-revolutionary measures.

The subjects of weights and measures was then dropped.

After a vote of thanks to the President and Secretary, and Assistant Secretaries, the Convention adjourned *sine die.—Med. News.*

# PART SECOND.

## AMERICAN AND FOREIGN INTELLIGENCE.

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*Lectures on Experimental Pathology and Operative Physiology*, delivered at the College of France, during the Winter Session 1859–60, by M. CLAUDE BERNARD, Member of the French Institute; Professor of General Physiology at the Academy of Sciences.

GENTLEMEN:—In my first lecture I made you acquainted with the course which I proposed to carry out in the study of Experimental Pathology, and I endeavored to show you how difficult it was to enter on the study of so complex a science as that of Medicine, without having previously acquired a preliminary knowledge of other sciences less complicated in their nature; lastly, I endeavored to combat an opinion, too generally entertained, viz: that physiological phenomena belong to an order of facts entirely foreign to those which occur in the morbid state.

We shall now enter on the study of the symptoms peculiar to the pathological state, the agents which give rise to them, and those calculated to bring about their removal; lastly, we shall produce all the phenomena of disease by artificial means, and shall then endeavor to make them disappear.

But, before entering on this subject, it is indispensable to ascertain whether everything which occurs in a state of disease can be explained on physiological grounds; or, whether disease has the peculiar property of originating, in the living being, laws altogether new, and of which we have not the slightest idea as existing in a state of health.

If, in the case of an adult in the full enjoyment of all his faculties, we ask ourselves what is the regulating agent, what the *primum mobile* of all physiological actions, we are constrained to reply that its seat is in the nervous system. It is to the nervous system that we owe both sensibility and voluntary motion, that two-fold source of all our relations with the external world; it presides over all organic functions, and it is my intention to prove to you, that while it is the origin of all the normal phenomena of life, it is also that of all pathological action.

In proportion as we ascend in the scale of animal life, we see the nervous system acquire greater development, and at the same time we observe that diseases become more frequent, more variable in their form, and more complicated in their nature. Why should this coincidence astonish us? Are not all our organs dependent directly on the nervous system? If we take, one by one, the differ-

ent systems of the animal economy, it will be easy to show that all the symptoms of the diseases to which they are liable, may be produced by direct irritation of their corresponding nerves. We can even give rise, in this way, to all the anatomical lesions by which they are characterized.

What, for instance, are the principal signs of the affections of the respiratory organs? Cough, dyspnœa, increased bronchial secretion; are not these the symptoms which most frequently proclaim their existence? Now all these phenomena can be produced at will by the direct excitation of the pneumogastric or certain other nerves; we can even call into existence the anatomical lesions incident to pleurisy and pericarditis. The causes of these morbid changes would therefore appear to be intimately connected with the nervous system. If we now turn our attention to the digestive apparatus, we shall soon be convinced that the physiologist possesses the same power relative to it, as he does in the case of the respiratory organs. By exciting the solar plexus and its efferent branches, we can determine both diarrhœa and dysentery, together with the anatomical lesions which habitually accompany them. Acute peritonitis has even been induced with all its consequences, as evidenced on opening the animal, by the presence of pus and false membrane in the peritoneal cavity.

Thus, then, a multitude of diseases may be brought into existence by a simple modification of the elements which the animal economy originally contains, without having recourse to the introduction of any new principle; and, if we were to examine the other systems of the body, results analogous in their nature would be obtained. Fever itself, that essentially medical symptom, can be excited by a mere mechanical irritation of the nervous system, and the products of inflammation, such as pus, false membranes, and plastic exudations, may, any or all of them, be called into existence in a similar way. In an animal, previously enfeebled, we can produce directly pleuritis with purulent deposit, by the simple division of the great sympathetic nerve; in order, however, to insure success in this experiment, it is absolutely necessary that the state or condition of the animal's health should be previously lowered.

It is, therefore, a fact, that the perverted state of the nervous system gives rise to a great variety of diseases, not only of a general, but also of a local character: deprive a muscle or a bone of its nervous supply, and you will have, as a consequence, fatty degeneration in the one case, and rickets in the other; in fact, if you tie the nerves, which enter the nutritive foramina of a bone, you will very soon see the cells of the lamellar structure increase in size, the vessels become more numerous, and all the phenomena of rickets follow in rapid succession: we can even bring about these results on *part* of a bone, without interfering with the remainder. This experiment has been successfully carried out, in the case of the lower jaw, by M. Schiff, of Berne.

But there exists in disease an immense number of other phenomena

which, at first sight, it appears impossible to produce by a simple lesion of the nervous system; I allude especially to the alteration or modification of the fluids of the body, which takes place in the course of certain maladies. Now, I am prepared to demonstrate that a vast number, if not all, of these morbid changes, are still to be traced to the action of the nervous system, and that they can be reproduced at pleasure by the physiologist. Among the various fluids of the body, the urine is that one the morbid changes of which have been the most carefully and completely investigated. Now you are perfectly aware, gentlemen, that albuminuria, polyuria, and diabetes are invariably produced by excitation of definite points of the medulla oblongata, the peculiar form of the perverted urinary secretion being determined by the particular portion which is acted on: it is in the case of diabetes especially that the importance of this experimental fact is fully brought out. It was supposed that in diabetic patients the morbid state created entirely new conditions in the economy, which gave rise to the pathological production called sugar; it is now, however, admitted on all hands that these phenomena are fully explained by the mere exaggeration of a normal function, in virtue of which glycose is generated in every individual even in a state of health. It is therefore evident that disease, in this case, is nothing more nor less than an exaggerated natural function.

There exists, however, a certain number of pathological products and morbid manifestations which we have not been able to imitate by the employment of artificial means. Shall we be able, at a later period, to connect these facts with those which already fall within the range of experimental physiology? Such is the scientific problem of the day. The question is, whether we shall, one day, be able to embrace pathology in its entire extent, within the compass of biological explanations, or whether we shall, in addition to all which we can imitate or explain, forever be compelled to recognize a *special principle*, mysterious in its nature, which we must acknowledge as a morbid or vital phenomenon?

Let us take, for example, eruptive fevers. small-pox, scarlatina and measles; these are diseases, indeed, which it is impossible for us to produce without having recourse to a special virus. Shall we, one day, be able to realize this undertaking without the intervention of the peculiar animal poison on which they seem to depend? Must we not, first of all, solve the question, whether such diseases as those we have just specified can possibly exist in animals, even in those which approach most closely to the human species? Are they not in reality the exclusive property of the human organization?

Nothing is more difficult than to produce, through the agency of the nervous system, eruptive diseases in animals, the vitality of the skin of which is essentially different from that of man. We can, nevertheless, produce ecchymosis, congestions and glandular swellings; but it must always be borne in mind, that each particu-

lar species of animal has its own peculiar diseases, which cannot be transmitted to a neighboring species, however closely allied they may be. Now man, in himself, presents a greater number of special diseases than all the other animals taken together.

Fortunately for physiology, such incompatibilities are rather the exception than the rule. Tubercle, cancer, and many other morbid productions, are found equally in animals and in man. Every disease which gives birth to morbid tissue is evidently a perversion of the nutritive function; now, who will venture to deny the influence which the nervous system exercises over this physiological act? We must, therefore, advance resolutely in the path which lies open before us, without allowing ourselves to be disheartened or intimidated by the difficulties of our science. But we must bear in mind that a disease is not characterized by one single symptom; it consists rather of a complete series of symptoms, standing to each other in the relation of cause and effect. It is, in fact, a morbid evolution which offers a commencement, a middle, and an end; so that a skillful and practiced observer, on witnessing the first stage of a disease, can predict its probable termination. This is no doubt true; disease does not consist in an isolated symptom; it is a collection of symptoms. Now these reunions of morbid phenomena, we indubitably succeed in reproducing in animals. The functions of life are modified in various ways by a variety of different agents. Poisons determine real disease which present an unbroken chain of symptoms, consequent on the introduction into the system of the toxic agent. Here, therefore, we find an entire class of diseases which can be produced at will.

But setting aside this question of such vast dimensions, and to which we shall revert at a later period of our course, let us inquire whether, by mere surgical operations, by mere mechanical lesions, we can determine on the animals subjected to experiment, a certain number of morbid series. If you simultaneously remove the two kidneys of a dog, or simply tie the renal arteries, you immediately produce a general disturbance in the entire economy. The animal is powerless in expelling the excrementitial product which should pass off by this channel, and the whole system becomes gradually poisoned. At first the animal is not seriously affected; it continues to eat and digest its food for a certain lapse of time, which corresponds with the period of incubation in diseases; by-and-by it is attacked with vomiting and purging, shortly after which it dies.

What takes place in a case like this? Let us endeavor to explain it. During the first period the urea, which can no longer be eliminated by the kidneys, is expelled by the intestines. It is found, together with the salts of ammonia, in the animal's excrements, and even in the gastric juice. If this new mode of elimination could be prolonged indefinitely the animal would not become diseased—it would not die; but very soon the mucous membrane of the intestines, irritated by the constant contact with the ammoniacal salts, gives rise to morbid changes. On the other hand, as

long as the urea is eliminated by the intestines, it does not find its way into the blood. This fact has been demonstrated experimentally by MM. Prevost and Dumas, who have not, however, succeeded in explaining it. Now, at a later period, when the mucous lining of the intestine refuses to continue this function, which is altogether foreign to it, the urea finds its way into the blood, and the animal soon expires, comatose and convulsed.

When the cessation of the urinary secretion depends on the ligature of the renal arteries, this state of things may sometimes be obviated by removing the ligatures; the self-same thing would also take place in man, if there existed an obstacle to the passage of the urine, and if it were possible to remove that obstacle; but in all cases in which the kidneys have been removed, death has always supervened. The destruction of the animal has been the invariable termination of the morbid series.

Here, then, we have a disease which can be artificially produced; but there are many others, the causes of which are agents existing exterior to the body; contagious affections belong to this class. The fact has been experimentally proved in the case of the peripneumonia of horned cattle, by the establishment of a communication between two cow-houses—the one containing healthy, the other diseased cattle. In the inclosure, which, in the first instance, contained only healthy cattle, several cases of this peculiar affection occurred in succession.

But independently of these various causes, the action of which I am far from being disposed to deny, internal accidents occur, and give origin to various affections in the economy. This has been experimentally proved; if you remove both the kidneys of an animal it dies; if you remove, however, only one kidney, the animal continues to live; the organ becomes enlarged, and plays both its own part and that of its absent fellow; a fact which can be easily ascertained by opening the animal a certain time after the operation has been performed. But if, instead of removing the kidneys, you simply make a division of their nerves, the animal dies. During the first few days which follow the operation albuminuria is produced; shortly after, inflammation of the kidneys sets up; they then mortify and become decomposed; so that, finally, they act on the economy like a septic poison, which inevitably leads to death. Such I consider to be the natural explanation of this *apparently* mysterious fact.

I now presume that I have established the initial proposition: Not only can we succeed in producing morbid symptoms in animals by artificial means, but even actual diseases, with their complete chain of results. Pathology, regarded from this point of view, combines the resources of physiology with those derived from clinical observation.

## *Do Bad Smells Cause Disease?*

The tendency of the human mind to rest satisfied with any belief that is authoritatively asserted, is too well known to require any comment. Philosophers of all kinds are no more exempt than other people from this easy style of dealing with difficult problems. Medicine is, we think, especially chargeable with cherishing pet answers to questions that force themselves unkindly on her; and we think that the way in which she has made up her mind as to the causes of various kinds of fevers is an example of this style of cutting the Gordian knot.

Of late years, it must have struck all our readers that pig-styes, dirty pools of water, open privies, ash-heaps, etc., have been declared highly criminal, and on all occasions even adjudged guilty of producing any kind of fever or bowel complaint that may have broken out in the neighborhood. If a child happen to suffer typhus in a farm-house, it is the mixen at the end of the barton that caused it. If an epidemic of English cholera befall a village, it is traced to the duck-pond by the road-side. If in a wealthy household the inmates are stricken with diphtheria, some open sewer, close at hand, has, as a matter of course, been the cause. So accustomed are we to hear this sort of reasoning resorted to on all occasions, that one feels a little difficulty in expressing doubts as to the certainty with which the effect is unhesitatingly traced to its cause. Nevertheless, we think there is at least sufficient evidence to cause reflecting minds to pause ere they give in their adhesion to the general opinion, and thus shut their eyes to further research and inquiry. Dr. Watson, has, we know, stated it as his distinct opinion, "*that neither animal nor vegetable decomposition is sufficient to generate fever of any kind;*" and the researches of Dr. Guy, and other observers, have certainly gone some way to support that opinion.

Dr. Guy, in his very interesting contribution to the *Journal of the Statistical Society*, on the health of night-men, scavengers, and dustmen, gives us a mass of statistical facts which, it must be confessed, run counter to the generally received opinion, that foul animal or vegetable emanations are the fruitful source of disease. This class of men, without doubt, spend their days in the very midst of filth of all kinds. He says:

"In most of the laystalls or dustmen's yard's every species of refuse matter is collected and deposited—night-soil, the decomposing refuse of markets, the sweepings of narrow streets and courts, the sour-smelling grains from breweries, the surface-soil of thoroughfares, and the ashes from the houses."

This heterogeneous mass the scavengers or "hill" people have to sort or to pass through sieves, so that the emanations arising therefrom must be brought into intimate relation with their lungs and skin. If fever and diarrhœa are so clearly traceable to the vicinity of these so-called noxious materials, surely the scavengers ought to be a poor, fever-stricken race. A medical examination, however,

of this class of workmen as compared with brickmakers and bricklayers' laborers, proves that the scavenger is comparatively exempt from disease. Thus, among a number of men examined in each of the three classes, it appeared that the numbers attacked by fever were, among the scavengers, 8 per cent.; among the bricklayers' laborers, 35.5 per cent.; and among brickmakers, 21.5 per cent.

This result seems extraordinary enough; but it may be argued that these men do not live in the laystalls or dustyards, and therefore that their exemption from fever may be attributable to this; but what can be said if the master dustmen and their families, who live all their lives in the midst of these heaps of so-called fever-nests, are healthy. Dr. Guy says:

"I do not think that, whether in town or country, such another body of men (as master dustmen) could be brought together, except by selection; and it is not going too far to assert of them that, if the comparison were limited to the city of London, or our large towns, no score of selected tradesmen could be found to match the same number of scavengers brought casually together."

Unless we suppose that the scavengers get used to this so-called miasmatic atmosphere, or that after a time it no longer affects them, we cannot see how the foul emanation theory can hold water. Nature cannot work in one place differently from another. Night-soil must be just as deadly in an open yard in London as in the country. But here we have the experiment tried on a larger scale, of a whole class of men subjected to foul emanations, and yet they are far from being an unhealthy race, and are not nearly so prone to fever or bowel disease as the brickmakers' laborers.

We are far from wishing it to be understood, however, that we do not consider foul emanations as dangerous or baneful under any circumstances. In our opinion, they become noxious when much concentrated. Our houses, for instance, are built on the principal of a bell-glass, and our drains and privies, and all other impurities, if allowed to give off a deleterious miasma, most certainly do become most virulent sources of disease. But, in the open air, we think it very doubtful whether these emanations are ever the cause of injury to man.

Let us watch with Dr. McWilliam a still more gigantic experiment on the health of the Thames waterside people, which has been going on for years, and is still proceeding. The whole sewerage of two millions and a half of people, has, within the last ten years, been turned into the metropolitan stream. Year by year its waters have become more contaminated, and its smell more disgusting. It should follow that the health of the waterside community is proportionally decreasing; that febrile complaints, cholera, and diarrhœa, are alarmingly on the advance. But what is the real state of the case? Dr. McWilliam, in his report for the year 1858, on the health of the Water Guard and Waterside Officers of Her Majesty's Customs, says:

"As respects bowel affections, in which I include diarrhœa,

choleraic diarrhœa, dysentery, etc., the types of those forms of disease, which in this country noxious exhalations are commonly supposed to originate, we find the additions during the four hot months of the past year from this class of complaints 26.3 below the average of the corresponding period of the three previous years, and 73 less than those of 1857."

The quantity of putrescent animal and vegetable matter in the Thames has been going on increasing; but the illness generally attributed to the emanations arising therefrom has been decreasing! We know that many will urge that all the combustibles (if we may use the term) being thus accumulated, it only requires the match to be applied, to find epidemics raging like wildfire. But the year before last, cholera did break out on the banks of the Lea, and there died out, apparently from want of sustenance. This year, according to the *Lancet*, cholera, veritable Asiatic cholera, has been on board the Dreadnaught; yet it has not spread, and there seems no likelihood of its doing so for this season at least. As Dr. McWilliam truly says, "it is nowhere sustained by evidence that the stench from the river or docks, however noisome, was in any way productive of disease." It is true that one waterman, in June last, was said to have died of Asiatic cholera, and that his death was ascribed to river poison; but, as the eminent observer whom we have just quoted, correctly remarks, "it is opposed to all analogy, and to the usual order of nature, and therefore unphilosophical, to suppose that a cause so extensively diffused should have been so singularly limited in its effect."

Greatly doubting, as we do, the alleged ill effects of foul emanations in the open air, upon human life, we nevertheless do not think that the crusade against filth should for one moment be relaxed. A bad smell may be no more unhealthy than a bad taste; but we should, if possible, avoid the one as much as the other. What we should, above all things, avoid, however, is the falling into the error of supposing that bad smells are the indubitable sources of many puzzling diseases, and of thus hardening our minds against investigations of the kind which were instituted a year or two ago by Dr. Barker, and which, when completely carried out, will enable us to decide what the noxious principles are which make all the difference between an unpleasant and a malarious odor.—*Chicago Journal.*

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## *Treatment of Vaginitis by the Glycerole of Tannin.*

In a long memoir on glycerine and its applications to surgery and medicine, M. Demarquay gives the results of his numerous experiments on the use of this therapeutic agent. We extract from his work the following passage, on the treatment of vaginitis:

Every one is aware that vaginitis is a stubborn complaint, and extremely difficult to bring under treatment; we however believe

that we have established a treatment by which this disease can be controlled, and whose efficacy is such that during the four years in which we have employed it, we had not one refractory case. The treatment consists in the application of pledgets of lint steeped in glycerine, tannated according to this formula:—

| | |
|---|---|
| Glycerine, | 30 grammes; |
| Tannin, | 10–20 " |

The Tannin is entirely dissolved by the glycerine, and the result is a substance of a beautiful brown color, inclining to yellow, transparent, of a semi-liquid consistence, very readily imbibed by layers of charpie or of cotton, and after application not draining out from them, even when held in the vertical position.

The application is made in the following manner: The speculum having been introduced, a large injection of water is made, for the purpose of removing all the mucus and pus which is spread over the vaginal walls, which are then dried with a pledget of lint placed at the end of a long stick. I then introduce one or more tampons of wadding well steeped in the tannated glycerine, besides a dry tampon destined to retain the small drops which may escape from the first. I withdraw the speculum, and leave the matters in this condition till the following morning. The tampons are then withdrawn, the patient having first taken a simple bath, and I renew the application exactly as I had done it before. Four or five such applications serve to accomplish a complete and definite cure. However, as simply a precutionary measure, after the last application of glycerole of tannin, I advise every patient for a week longer to make injections two or three times a day of a decoction of walnut leaves, with the addition of four grammes of alum to the pound.

In some cases this application cannot be immediately applied, as the inflammation is so extremely acute as not to permit the introduction of the speculum. In such I commence by treating the inflammation by an appropriate diet, baths, and soothing injections frequently repeated.

Following the regulations which we have specified, our tamponing is not only not painful, but also incommodes but few patients. They can rise and remain in the upright position part of the day. The local effect of glycerole of tannin shows itself by the following syptoms:—Coagulation in some measure of the mucus-pus which is secreted; change of color in the mucus of the vagina which loses its inflammatory redness; dryness of the vaginal walls and tightening of the wall membrane; disappearence of pain and issue.

I have had opportunities of using this treatment in the Municipal Hospital and in my private practice, and I repeat that I have not seen in the space of four years, a single case of vaginitis which has proved obdurate. Several physicians have employed it with the same success as I have had, and I have no doubt whatever that any one following the directions I have given above will obtain results similar to those which I meet with every day.

M. Aran has tried simple glycerine in injections into the vagina

and womb, for ulcerations of the neck of the uterus and uterine catarrh. The injections into the womb proved very painful, on which account it had to be given up. These trials having been made with glycerine alone, it is possible that the pain which annoyed M. Aran's patients was due to an impurity of the article. Now that we can so easily obtain pure glycerine, this point is in a fair way to be proven. As regards ulcerations of the neck, they have not been sensibly modified. We have tried for our part the application of tampons steeped in simple glycerine, but the results have been so far from encouraging that we have not pursued this line of treatment any further.—*L'Abeille Médicale.*

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### *Condition of the Interior of the Eye as seen by the Ophthalmoscope in an Impaired Vision from Blows.*

For several months Mr. Haynes Walton has submitted to a careful ophthalmoscopic examination every case that has presented itself to him of defective sight from a blow on the eyeball; and in all there have been marked physical changes that could be directly pointed to as disturbing sight. The fact is, so far as it goes in opposition to the idea of concussion of the retina, by which was meant some functional derangement, to which the result of these accidents used to be attributed.

Lesion was noticed in all. In the majority, there was more or less detachment of the retina, probably from effusion of blood. The degree of loss of sight was in proportion to the area detached. Less frequently, there was blood effused into the vitreous body. Once the lens was partially displaced backwards, but retained its transparency. The detachment of the retina is, of course, irremediable; effusion into the vitreous body admits of recovery in a remarkable degree; and, even where there has been so much effusion as to prevent illumination of the eye, perfect vision may be restored. This shows how useless it would have been in any of these cases to institute the routine of a mercurial course, which certainly would have been resorted to prior to the ophthalmoscope.

Very few of the patients were submitted to any treatment, because of the lapse of time between receiving the injury and their application at the hospital. Mr. Walton's plan of treatment, in any recent case in which there is diminution of sight, or pain attendant on the accident, consists in rest of the eye, and cessation from all activity of the body, the local application of cold, and, if there be very much pain, of opiates, and perhaps even leeching or cupping to the temple. With this he enjoins regulations of a general kind as regards diet, the avoiding of stimulants, etc.

Wounds and blows about the forehead and circumference of the orbit, which do not touch the eyeball, may be followed by blindness; and many theories have been advanced to account for this.

It has been supposed that the nutrition of the eye suffered through some injury to the branches of the fifth nerve. Mr. Walton suspects that here the eye suffers from the same lesions as in direct injury, although up to the present time, he has had but one opportunity of making an examination.

A workman, in middle age, was severely struck on his forehead, just over the left eyebrow, six years ago; and quickly lost all useful sight. He could not exactly say how quickly it went, as his memory did not serve him; but it was a direct consequence, and when the swelling of the brow and the ecchymosis had passed away, the eye was useless. It would be difficult to name any method of treatment that had not been tried; for the man had been to most of the general hospitals in London, and to several of the special ones. He could not read type of any size, but could just count his fingers when they were held up against the light. There was no objective symptom whatever; and therefore it was impossible, from a mere external survey of the eye, to say what was at fault. Mr. Walton directed the pupil to be dilated, and then used the ophthalmoscope. Detachment of the retina was at once discernible in a cloudy whiteness at the fundus of the eye, instead of the natural bright red color of the choroid. The focussing of the instrument, too, failed to show the optic disk, or any parts in detail; instead of these, there appeared the uneven white cloud with a few vessels, not very definite, in irregular arrangement. Here was of course, an irremediable injury from the first; and far better would it have been for the patient, and more to the credit of surgery, had this been at once made out.—*British Med. Journal*, Aug. 13th, 1859.

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### *Acupressure for the Arrest of Hemorrhage.*

At a late meeting (April 24th, 1860,) of the Royal Medical and Chirurg. Society, Mr. Syme, of Edinburgh, in reply to a question by Mr. Henry Thompson, said that acupressure was not, in his opinion, calculated to improve the practice of surgery. In the first place, he did not think the objections alleged against the ligature were fully justified; in the second place, if the ligatures were objectionable they had a better substitute for it in torsion than in the needle process; thirdly, he thought the needle process was hardly practicable, and in some cases not practicable at all. It had been said by the proposer of the method that the ligature would occasion gangrene. That simply showed that the individual who proposed it did not know the meaning of surgical language. As to ligature causing irritation, that assertion was not true. He had repeatedly tied the femoral, and left the wound to heal by first intention, there being only a few drops of matter, and in one case not a drop, showing that the ligature was not the cause of irritation. He had given up the practice of cutting away one thread, always

preserved both; and he regarded ligatures rather as useful assistants than as obstacles. After amputation, the great impediment to union by the first intention was the presence of blood, which coagulated, and led to the formation of abscess. The ligatures prevented this, made way for the discharge, and did good rather than harm. But if ligatures were sometimes objectionable, the process of torsion was a convenient substitute, the success of which he had repeatedly seen. As to the acupressure, it could very rarely be employed; and his only surprise was that any practical surgeon should have given it two thoughts. It was a tub thrown out to amuse the whale, more especially to feed the whale, and would never have been heard of had it not been brought under the notice of the profession by a medical journal published in London, understood to be under the control of the proposer.

Mr. Spencer Wells said he should not notice the personalities with which Mr. Syme concluded his speech; but with regard to acupressure he thought it but just to say that he had employed that method in a case of Pirogoff's amputation at the ankle-joint, in which the needle was fairly pitted against the ligature. The anterior tibial artery was compressed by the needle, and a plantar branch of the posterior tibial was tied by a ligature. The superiority of the needle was most marked. In forty-eight hours Mr. Adams, whose case it was, removed the needle, and there was no more trouble about it. The ligature remained some five or six days afterwards, setting up suppuration in its track, and keeping open the wound in the manner which Mr. Syme appeared to think so favorable (the patient thought otherwise), but which certainly delayed the cure. The case would have been better treated if it had been easy to compress the posterior tibial artery in the same manner as the anterior tibial, if he had not to learn the A B C of acupressure, as all must do. There might be many cases in which the needle is not applicable; but he believed if he had known then what he had learned since, he might have been able to compress the plantar artery as easily as the other. So far from the introduction of acupressure exhibiting any want of surgical knowledge on the part of the gentleman who proposed it, he believed it to be one of the many gifts, including the introduction of chloroform, for which surgery is indebted to that great man. Mr. Wells further expressed his conviction that acupressure will prove a most useful means of suppressing hemorrhage, and he had learned its utility in compressing varicose veins. He believed also that it will hereafter supersede the ligature in the treatment of aneurism. With regard to the effect of the ligature upon the ends of divided arteries, every surgeon knew that the part of the artery beyond the ligature must be killed by it, and that a piece of sloughy tissue cannot do any good when confined amid the living tissues of the body, however useful Mr. Syme might consider it to be.—*Med. Times and Gaz.*, May 5, 1860.

# PART THIRD.

## BIBLIOGRAPHICAL NOTICES AND REVIEWS.

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*A System of Surgery; Pathological, Diagnostic, Therapeutic and Operative.* By SAMUEL D. GROSS, M. D., Professor of Surgery, in the Jefferson Medical College, Philadelphia, &c., &c. Illustrated by nine hundred and thirty-six engravings, in two volumes. Philadelphia, Blanchard & Lea, 1859.

Some months have now passed since this work was issued. Its appearance has been extensively announced, and the work universally commended. These facts supercede the necessity of any thing like an extended notice. Though we have not perused the whole of the two massive volumes which constitute it, we have given attention to several different chapters which we suppose to be fair specimens of the whole. So far, every thing tends to commend it as being prepared with great care; a care which is manifest in the general arrangement of topics, the clear style in which they are discussed, and even the minor matters of punctuation, proof-reading, &c. It aims to be a complete and systematic treatise. It is impressed upon us, as the result of our partial perusal, that a great and noble undertaking is very rarely more perfectly consummated. We contemplate it with mingled satisfaction and pride, as a fit crowning of the noble career of its author. We confess that we have looked forward to it with some unpleasant apprehensions. Monograph after monograph, volume after volume, have emanated from the pen of Professor Gross, all evincing rich and varied experience and learning. It has seemed to us that his ambition for authorship was leading him over too much ground, and that in so soon appearing in this great undertaking, the result must almost necessarily be crude, and tend to mar, rather than enhance his fair fame. But if this work is thus characterized we are unable to find the proof of it. It is not necessary that we should commend it to the patronage of the profession. Destined as it is to be the great standard of American practice, no responsible practitioner can afford to be without it.

H.

# PART FOURTH.

## EDITORIAL AND MISCELLANEOUS.

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### *American Medical Gazette, (New York).* DR. REESE.

A variety of other duties prevented us from taking any part in the last issue of the Journal; hence our silence with reference to the American Medical Gazette. Nor are we now without misgivings as to the propriety of a reply. We have no disposition to have even the appearance of underrating the profession of our own country. Besides, the *Gazette* looks as though it was capable, to some extent, of misrepresentation.

That the reader may recall to mind the issues between the *Gazette* and ourself, we will state, that in a previous number we alluded to the dangers threatening our *political* existence; to the fact that we appeared to be drifting towards a destruction of our Confederation. We deplored this state of things and remarked in connection therewith, that it was much to be regretted, on account of, among other things, the condition here of medical science. We stated, that, as yet, we had accomplished little or nothing; but that if not disturbed by "political revolutions," we would amount in time to something right clever. Over these remarks the *Gazette* made quite a flourish, ventilating its penchant particularly to the use of rough words and censoriousness. What we said was dubbed "*Hyperbolical Caricature*," and pronounced false. Very amiable this, truly! and then again, such language looks so much like what has to be used in the cause of truth!! We replied to the *Gazette's* "hyperbolical caricature," and, in order that we might not be regarded as dealing entirely in generalities, we asked it a series of questions. These questions it parades (April No.) with studied formality, and appends to each one what it regards, no doubt, as a complete answer.

Now in the first place, as the lawyers sometimes say, we demur to a large portion of the *Gazette's* answers, on the score that they

are too general, mean nothing. We are represented, for example, as asking this question:

"What have we, as a nation, discovered in Physiology?"

The *Gazette's* answer is:

"Much,—much every way; no time for specifications."

Of course, we and the Public, are enlightened by such an answer. We can all see at once what is alluded to! We were once enjoying a concert with a venerable Elder of the church, and having heard that he, at home, occasionally pandered to his musical taste, we asked him if he could not play the *fiddle*. "Yes," he replied, "a few." How could our curiosity need more? Full we were to the brim with satisfaction, and went on with our friend enjoying the concert, as well satisfied as if we had drawn out of him the secret for finding the *Philosopher's Stone*. But the *Gazette* says it has no time for enumeration of "contributions" purely American. Take time, my dear sir. We are in no hurry. We do not wish to see you weaken your cause by hurrying yourself. We *have* contributed to Physiology, but after deducting for theories pure, how much have we left? We were all on tip-toe of late, that with vivisections, the crucible, the microscope, &c., we were rapidly approaching a complete solution of the science of Physiology, when all at once we are thrown back by learning that we can have secretion without glands, circulation without heart or blood vessels, motion without muscles, and volition without a brain or nervous system.

In the propriety of another of the *Gazette's* modes of answering questions we do not fully concur. We are represented as asking:

"What new disease have we described?"

The answer of the *Gazette* is:

"Nothing new under the sun."

This we take to be a kind of an "*argumentum ad ignorantium*."

Are not the editor of the *Gazette* and ourself *new* men? Or are we a couple of the sons of Adam, that "went under" some 6000 years ago, to appear again exactly at the time our services were most needed in keeping the world straight. If, therefore, we are not somebody else than ourselves, is it not likely that we would have *our* own diseases? Adam at one time had no maladies of any kind. Still was he not, while enjoying this enviable exemption, under the *same sun* that we are? Was Bright's disease of the kidneys known

previously to 1837? Who, before Hughes Bennet described Leucocythœmia? Such inquiries might be extended indefinitely.

The truth is there are *new* diseases, or what amounts to the same thing, diseases that are new to us. Diseases, and forms of disease, and complications that have not been noticed or described anterior to the nineteenth century. The human organism, from Adam until now, has been constantly undergoing change. Adam, even after the sentence of disintegration had been passed upon him, lived more than 900 years. So did some of the Patriarchs. Were the aberrations from the physiological standard the same then as now? Ligaments now get stiff, the bones become fragile, muscles wear out, and the brain softens at "three score and ten." America has its own flora and fauna. The white man here is an exotic; and, as a consequence, has not the transplanting process involved many important "alterations?"

In alluding to the condition of our Medical Colleges, we inquired whether or not we had any that were not still in the *formative* stage. The *Gazette* in reply states:

"The Universities of Pennsylvania, Nashville, and New York, *are out* of the formative stage."

In common with the rest of the profession, we are proud of these Institutions, but not more so than we are of a score of others that might have been named. But really, are either of the Institutions named, out of the formative stage? Is there no further room for improvement—nothing that needs perfecting still more? We doubt very much whether either of the renowned Institutions, to which our attention has been called, as having passed the "formative" stage, would authorize, or even thank the *Gazette* for its remarks. We hear that all of them still continue to issue diplomas to young men without inquiring a word with reference to literary education. Does this look like having passed the "formative" stage? Are colleges perfect, without room for improvement, that do not even demand as a pre-requisite to the degree of Medicine, that the candidate possess a respectable knowledge of his mother tongue. We do not blame the colleges in this matter. They do the best they can under the circumstances. They have to fix their machinery to work a part of the time on bad material. Then again, if we had the very best material, the colleges could not make the most out of it, as they are, at present, organized and conducted. The number of professors is too few,—the sessions too

short. Nathan Smith, once at Dartmouth, filled every chair in the school; and he likely did the different departments as much justice as six or eight professors now can. We commenced medical education in this country with two sessions of *four* months each as the time proper for imparting a knowledge of medical science. We continue with very slight modification the same usage. Is this length of time sufficient. Is there a Faculty living that can do justice to the science in double this length of time?

We do not wish to be invidious, but we will ask our cotemporary a few questions in regard to *New York University*, as this is one of the schools said to have completed the "formative stage" and the one, of those mentioned, that he is likely best acquainted with: What improvements has the University on the literary education of the student? what is the method of teaching? what number of professors, and how long the sessions? Has the faculty or any one of its members made any important discoveries, such, for example, as ascertaining what are the functions of the supra-renal capsules, pineal body, pancreas, spleen, liver? If so, let us have something out this way that it will be respectable to communicate to students. The organs named are certainly important, and would it be right to consider a school entirely "out of the woods" without being able to tell the student something about them?

The truth is, the University of New York is, like the rest of the colleges of the country, just, comparatively speaking, in its infancy. If it is blessed with a corps of industrious professors for a few hundred years, it may get a glimpse of things as they are. The idea that it has arrived to complete manhood, and susceptible of no farther improvement!!

For a few years, quite a zeal has been manifested in our country on the subject of *Microscopy*, and in referring to this fact we stated that, if we were not prevented by political revolutions from prosecuting this exquisite branch of physical science, we would in time know something about it. To this the Gazette replies:

"The science of Microscopy is yet in its infancy, but nowhere has it more ardent cultivators than in America, or more successful manipulators, *while in the manufacture of instruments we excel the world.*"

Excel the world in the manufacture of instruments! Well, that is news, to say the least of it, and quite refreshing, too. We are

aware that we have microscope makers in the country, and very good ones at that. Indeed, we take, in this connection, great pleasure in stating that the instruments manufactured by C. A. Spencer, of Canastota, New York, or by the firm of J. & W. Grunow, and *objectives* by Tolles, of Canastota, New York, are very excellent; and we say to our friends in search of even first class instruments that they can be obtained of the houses named, and at prices below the cost of those of foreign manufacture; for on foreign microscopes there is a duty of 30 per cent. and a number of other expenses, all of which may be avoided by purchasing at home.

But now, that our manufacturers *can beat the world*, as the Gazette alledges, is an assertion, as far as we can see, without any proof whatever. Has the Gazette been all over the world to see what the different nations are capable of in the way of making microscopes? Its remarks would seem to involve the idea that it had. Has it even made itself acquainted with what our near neighbors have done? Has it had interviews with Dolland and Lister, to whose discoveries we owe almost every thing pertaining to the acromatic microscope? The former gave us the *crown* and *flint* glass idea for objectives; the latter, the *doublet* and *triplet* combinations. Has the Gazette looked into the capabilities of the London microscope-makers, Ross, Smith and Beck, Powell and Leland, or into the capabilities of the Paris makers of microscopes, Chevalier, Oberhauser, Brunner, Nachet? Some of these houses have been in existence a long time, have had the stimulus of extensive patronage, have executed the improvements and inventions, for the first time, of eminent opticians, and have made many improvements themselves. We have done admirably for our time, but when we recollect that we have invented little or nothing, have imitated mostly what others have done, sometimes improved a little on it, we are at a loss to see the propriety of the Gazette's remark, "In the manufacture of microscopical instruments we can beat the world."

Such remarks have simply the effect of exposing us to ridicule. Suppose Spencer did make an *objective* with which he succeeded in resolving the lines on *Navicula Spencerii* and *Grammatophora subtilissima*, does it follow that nobody else has done, or can do, the same thing? Do these facts place Mr. Spencer above every body else in the world?

We have extended our reply beyond what we intended. Still

we have not elaborated the exposure that the Gazette has so richly merited. From what, however, the reader has before him, he will be enabled to judge of the Gazette's effort as a homilist; and will also see how imprudent it is for any one, with even the Gazette's capacity, to attempt to write upon subjects without knowing something about them.

We repeat the remark made at the commencement, that we have had no disposition whatever, to detract one iota from the merits of the American medical profession. We claim to be an inside-brick in the structure that is now going up in this country to the memory of Hippocrates. Nor on the other hand do we wish to encourage the tendency, so common among neophytes in science, to exaggeration. As a nation we are respectable, and will be respected when what we are capable of is fairly set forth; while, should we play the part of the braggadocio, we will be simply laughed at.

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### *Notes on a Trip to the Eastern Cities.*

We took the cars on the Central Ohio Railroad on the morning of the 15th of June, at 4 o'clock, A. M., and passed over the Ohio River before noon, a distance of 137 miles. After crossing the river at Bellaire, we soon found ourselves in the scenery of the Alleghany mountains, and before twilight of the same day we reached, on the Baltimore and Ohio Road, the hydrographical axis which divides the streams that flow into the Atlantic through the Chesapeake Bay, from those that reach the same ocean through the Gulf of Mexico. At the point where the railroad crosses, the height of the mountain is 2,700 feet above salt water, the greatest railroad elevation in the United States. As all know, the atmosphere on the route seems to be very pure, while the scenery is picturesque and grand. Typhoid fever nevertheless finds, according to the monograph of Dr. J. E. Reeve, abundant material here to work upon. In many of the counties within the Alleghany range the disease is encountered every year, while at some points, as on Tygart's Valley River, there have been epidemic visitations of a very malignant form. Here are truly a set of circumstances very different from what are found in cities, jails, ships, etc. In Europe it has become very fashionable to regard Typhoid fever as the result

of "*crowd* poison." We have no "crowd" in the Alleghanies. The towns and villages are generally small, and the rural population very much scattered along the mountain slopes and in the valleys; while every where we have the atmosphere charged with exhalations from the turpentine tree. Turpentine is a remedy, in the estimation of some, for the disease.

The ascent of the mountain grade on the western side, is imperceptible and easy, and develops many scenes of nature and art combined, that are worthy of observation. "Kingwood Tunnel," 261 miles west of Baltimore, is a stupendous work, nearly a mile in length, and has been constructed at a cost of $1,000,000. It is now solidly arched and has recently been widened for two tracks.

HARPER'S FERRY.—This place has been fixed up by Nature to attract the traveller. Here we have the junction of the Potomac and Shenandoah rivers, and the appearance that both of these rivers, at some previous time, put their shoulders against the *Blue Ridge* mountain and hoisted it out of their way. Jefferson, I believe, has the credit of giving the first topographical description of the place, and suggests it as "*one of the most stupendous scenes in nature, and well worthy of a voyage across the Atlantic to witness.*" Our readers are aware that this was the place selected by Brown for commencing the work of liberating 4,000,000 of slaves. Skirted on two sides by the mountains, the place would, it might be supposed, present to the eye of the "General" a pretty good fortress in the event of an attack, and in the event of defeat, fine grounds for retreat and guerrilla warfare. But the time had not come for the liberation of the negroes, and the two or three that gathered together in the name of Emancipation were not smiled upon and blessed.

Above Harper's Ferry some twenty miles, in the Valley, we took our first lessons in the alphabet and the nine digits. The old school house is still standing, and we seldom ever travel over the Baltimore and Ohio Railroad without departing from the beeline sufficiently to visit the few acquaintances still living in the locality, and review the scenes of childhood and youth. While we were learning the a, b, c's in Darkesville, Virginia, our nation had the honesty and simplicity of a child, but the efficiency of a full grown man. Now it is proud, vain, speculative, and rapidly tending to disintegration. The foundation of a clever civilization was laid with great care, because it was regarded as an experiment.

Concessions, compromises and mutual forbearances obtained in every step taken, and for half a century we supposed ourselves on the road to distinguished destiny. But, *tempora mutantur*, etc. We are now about in the fix of an ancient nation that, after reaching the highest order of cultivation, lost sight of things practical, utilitarian—became ethereal and sentimental, and thus rendered itself an easy prey to its neighbor. Its neighbor said to it, "You can't do for yourself any longer. Come home with me and I will take care of you the rest of your life."

THE JAPANESE EMBASSY.—From Virginia we proceeded over to Philadelphia to take a look at the Japanese. We found them at the *Continental*, the finest hotel, a Philadelphian remarked to us, in the world.

As to the reasons of the Embassy for visiting our country, our readers are already abundantly informed. Our object was simply that of a little observation. We found the company at the Continental enjoying exclusive quarters. A suit of the best rooms of the house was partitioned off in such a way as to allow of neither ingress nor egress except through the espionage of a police officer stationed at the door. This measure was necessary, as we soon discerned, to prevent the yellow visitors from being smothered to death by the curious of all ages and both sexes, who crowded around the door in great numbers, asking, imploring and, some of them, cursing for admittance. To the guests of the house, however, the opportunities for indulging the optics were as good as could be desired. Among these, the different members of the Embassy circulated very freely, and much more unreservedly than might have been expected, owing to their shyness and non-intercourse habits at home.

As all know, they are of the Mongolian type; and we were impressed, on first view of them, with their great resemblance to the Chinese. To a superficial observer they all look alike, and there are many characters that apply to them all. A closer inspection, nevertheless, reveals diversities. The stature is rather uniform and less, some three inches we should think, than that of Americans. In color the skin resembles the pale yellow of the Chinese, and contrasts strongly with the *red* of the native American. The hair is straight, black, not plentiful; the beard light; no whiskers or mustaches. All that we saw, shave their heads. The two physicians had their heads shaved clean, a measure required by

their rank. Others shave but a portion of the head. This shaved portion embraces a space, commencing on the forehead and extending back to the crown, having an average width of about four inches. The hair is then drawn up from the sides and back part of the head, and tied over the part shaven. Like the Chinese, the form of the head is *pyramidal*, rather round, and uniform in size, though less than that of the Caucasian. The face has great transverse diameter, owing to the expanded zygomatic arches; nose large, flattened, and bottle-shaped at the extremity; lips thick. As a general rule the face is full, fat, and, in some instances, has the swell of the lager beer Caucasian. We looked for the oblique eye, but did not see it well marked in any of them. Taken all together the face is large, and the area, as compared with that of the cranium, greater than among Europeans. The forehead is low and receding, the vertical diameter of the head short, and, as a consequence, a very large proportion of the brain is behind the ears; hence, the phrenologist would say, their polygamy.

The physique, from the specimens that the Embassy presented, is certainly less powerful than what we find among our people. In movement, however, it is easy, quick, and agile—no appearance of crooked backs, stiff ligaments, or rheumatic joints. The gait is shuffling, and the foot kept close to the ground in walking, owing to the wearing of sandals, I suppose.

Among the things most striking in the appearance of this people is their *dress*. There is no such a thing as a "tight fit" in any thing they wear. Every garment has the capacity and ease of the morning-gown. None wear shirts that are visible. The pantaloons are very wide and short, and over them and slightly conforming to the legs, is a drapery still more ample. Covering the trunk in such a way as to leave the neck and upper part of the chest bare, is a loose wrapper, occasionally with a cape upon it, that extends to the waist, where it is fastened by a belt that seems to serve the purpose also of suspenders to the pantaloons. Nothing is usually worn on the head, though once in a while a member of the company will appear with something nearly resembling a misses straw flat, placed on the very top of the head, without embracing the least portion of it, and secured by ribbands under the chin. The feet are covered with sandals—the forepart of which is divided into two compartments, one for the great toe, and the other for the lesser toes. This arrangement secures more

firmly the article to its position. The sandals are constructed of straw and wood, covered over and ornamented with silk and velvet.

There being no sheep in Japan, the clothing is cotton and silk, often very heavy, rich, and beautiful.

Is this dress, that we have imperfectly sketched, worthy of a thought as to convenience, or utility? Here is a nation that has a climate similar in latitude to our own, and with meterological characters not very unlike what obtains in islands of near the same latitude east of the American continent. The nation has worn out more clothes, doubtless, than we have; and, it is to be presumed, ought to know something of æsthetics. The loose and roomy character of every article of clothing certainly promotes comfort, and facilitates growth and motion; and why not more philosophical than "tight" pantaloons, "dress coats," or "lace-jackets?" Then, again, how much do these people err in having the upper part of the chest, the neck, and head exposed, like the face and hands? Are not such practices as sensible as cravats, comforters; and as wool, fur, or silk, starched and modeled into the stove-pipe form as a covering to the head, and adapted to it too with the exactness of a glass jar receiver over an air-pump? When the Japanese wear a hat at all, it is so constructed as to keep off the sun or rain, but not to interfere with either the growth of the hair, or the circulation. Baldness of the pate (*Alopecia*) is a very common trouble with our people, and that one a bachelor bears as impatiently as he does the noise of children. May it not be due, in part, to our fashion of covering the head? Females have less of it than males, because, perhaps, the head-dress is lighter and more pervious.

Physicians of the Embassy.—In the Embassy were two *physicians*. Owing to the fact that they communicated but imperfectly, and mostly in monosyllables, no one had an opportunity to ascertain what they knew of medicine, or the condition of the science in their country. They were invited by the surgeons of Philadelphia to witness operations, and seemed to take an interest in what they saw. They purchased a copy of *Gross' System of Surgery*, to take home with them.

No one could observe these people very long without being impressed with their peculiarities. Without the amount of mental or physical force which we possess, they nevertheless have erected and maintained a civilization that in some respects is founded on enlarged and deep views of human nature; and has incident to its

operations fewer vices than ours. Long attrition and friction against each other, like the effect of the wheel on pebbles in making marbles, have rubbed away all the angles and asperities of nature, and hence the general suavity of manner common to them all.

The last evening of the stay of the Japanese, the Philadelphians entertained them with a display in the way of *Pyrotechnics*. Explosive and luminous devices are perhaps better understood in Japan than here; for, although the two Ruggieries, father and son, have the credit of inventing and bringing to notice everything in this line, there is every reason to believe that the Chinese are entitled to priority. Suffice it, however, to say, that nitre, sulphur, charcoal; the filings of iron, steel, copper, zinc; resin, camphor, lycopodium, were put under contribution, *secundem artem*, for the pleasure of Japanese eyes, and they seemed to enjoy the sights. "What a childish display," some one, who was looking with us out of the window, remarked, and we forgot to reprove him for his bad taste.

So much for the Japanese. We looked upon them as being on a "fool's errand" to this country. Feted and caressed as they have been by our people, they are little conscious, if intercourse is kept up with their country, of the condition we will have them in, in half a century. We are progressive, subversive, and "dissipative;" and these traits will not be long in being demonstrated in Japan. England has put one hundred millions of the Hindoos to work for her, within the last one hundred and fifty years, and has now a war with China to inaugurate a similar policy there. We are no better. An inferior race in our hands gets no quarter. Non-intercourse is the policy for Japan if she would be happy and free. Her trade with us, which would not, in all probability, amount to half a million of dollars annually, will turn out to be a poor compensation for loss of independence, and the reign throughout her empire of American and English cupidity.

Franklin's Tomb.—No one can visit Philadelphia without being reminded that it was the theatre of the immortal Franklin. Here it was that many of his noble deeds as philanthropist, statesman and philosopher were witnessed. His experiment, that proved the identity of the explosive discharge of the Leyden jar, and atmospheric lightning and thunder, was made in, what was at the time, an open field in the vicinity of this city. His remains, with those of his wife, were deposited in Christ's Church Cemetery, a

locality now in the heart of the city, fronting on Arch and Fifth streets. The grave is found in one corner of the cemetery, and is marked by a plain slab of Pennsylvania marble, six feet in length, four feet in breadth, two inches in thickness, resting on a brick wall one foot in hight. The slab, as one of his descendants informed me, was prepared according to Franklin's own directions, and upon it was placed the following:

BENJAMIN
and
DEBORAH
} FRANKLIN.

179

It appears that the philosopher expected to survive until after the year 1790, and hence he left the blank after the figure 9, to be filled as the event might require. He died, however, in the year 1790, and to the figures which by his own directions had been placed upon the slab, his relatives had only to add the cypher. The remains of his daughter, Sarah Bache, wife of Richard Bache, and those of his son Francis, lie by his side. The latter died Nov. 21st, 1736, aged four years; and on his tomb-stone the father's affection is poured out in the beautiful little epitaph, "*The delight of all who knew him.*"

Here, then, we have dust to dust, without ostentation. A plain slab covers all that is earthly of a man whose name will continue in the archives of science long after the gigantic marble monuments and pyramids, erected often over insignificance, shall have passed into solution. Who is there that appreciates what Franklin did, without venerating his taste as to the phenomena that should mark his final resting place?

(To be continued.)

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NOTICE TO SUBSCRIBERS.—The present number completes the *Twelfth* volume of the Journal. Many of our subscribers are in arrears, not only for the present but for previous volumes. Indeed, we have thousands of dollars in the hands of those who have been reading the Journal for years, that ought to be remitted to us at once. To quite a number, during the past year, the work has been sent with an invitation to examine it, and if pleased with it to become subscribers. In many instances we have had favorable

returns; in others, after receiving the most of the numbers for the year, notices af "*discontinuance*" have come to hand. We have never been prepared for such acts of injustice at the hands of medical men, and they would affect us unpleasantly, were we not of the belief, that in many cases they are purely the result of carelessness. Those who know themselves in arrears will, if they wish the succeeding volume, please remit at once.

### Thirteenth Volume.

The *Thirteenth* volume of the Ohio Medical and Surgical Journal will be commenced with our next (September) number. The work is now one of the oldest in the United States. To it have been sent for *Review*, since our connection with it, pretty much all of the medical works during the time published, or re-published in the United States. Besides, notices and reviews of scientific publications, and the transactions of societies for the promotion of knowledge, have, from time to time, appeared.

Our own course, and that of our colleague, has, in the past, been marked by a rigid adherence to the suggestions of science as the only basis of medical practice. The leaning that has been so obvious in many places to the "do-nothing" system; and the skepticism, expressed occasionally in high positions, in reference to the curative powers of drugs, have received no sympathy at our hands. We have exposed them as the mere results of whim and fashion, and only advocated by men of rickety intellect, or dishonest tendencies. We have never, however, contended that in the management of disease "*Nature*," in the language of Rush, "*should be kicked out of doors;* or with Stahl, that drugs act as mere assistants of Nature in curing disease. Such are mere dogmatisms. Our doctrine is, we have drugs in the materia medica that can take a disease by the cuff of the neck and the seat of the breeches, and pitch it out of the organism; and it is only a matter of time and experiment, that all other drugs may be used with the same certainty as quinia.

Nor have we been backward in the expression of our opinions as to the course and tendencies of our Medical Literature. Journals have been multiplied until we have some forty, or more, in number, and books have increased until we now rival, in this line, the oldest countries of Europe. *Scribbling*, indeed, has taken the place too much of original investigation; and, as a consequence, we

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have less character than we ought to have. Very few among us really can get their consent to labor and plod for weeks, months, or years together, in a quiet unostentatious way, in getting hold of a little abstract truth, *that is a truth;* and from which a thousand practical measures may flow. We owe it to ourselves, as well as to the world, to *increase*, as well as to *diffuse* knowledge.

For the future we have no promises to make. We will try to make the Journal reflect the state and tendencies of the profession. Every thing that occurs abroad or at home, new or valuable, will be recorded. We have a large number of Correspondents to whom we are indebted for past favors; and we have assurances that they will not be unmindful of us hereafter. To these we have been indebted very much for rare cases and accounts of Epidemics. Their contributions are always interesting; and, in many instances, have been extensively republished by other Journals.

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Medical Journalism.—*Peninsular and Independent.*—Only a couple of years since the two medical journals of Michigan, The Peninsular and The Independent, were merged under the name of the Peninsular and Independent, under the proprietorship of Professors Palmer and Gunn. A recent issue contains the announcement of a suspension for the want of support.

This journal was ably and honorably conducted, was issued in most creditable style, and had the co-operation of an able corps of contributors. It is certainly to be regretted that State pride, if not a higher consideration, did not prompt the profession of our neighboring State to sustain its only medical periodical.

*Belmont Medical Journal.*—Our friends of the Belmont Medical Society, after a commendable effort to sustain their "organ," have yielded to necessity, and suspended. There is one point of view in which these frequently occurring suspensions are very unfortunate. The projectors of new enterprises usually endeavor to commence on the basis of advance subscriptions. The fact that a large part of our journals fail within a few months or years, tends to deter physicians from advancing their money, and leads them to adopt the precaution of holding on to the funds till they have

received the worth of them. This distrust is fatal to new enterprises, affects all our journals more or less, and tends to beget and foster the miserable credit system, or rather system of non-payment, which is so destructive of the interests of medical journalism.

NEW JOURNALS.—*Georgia Medical and Surgical Encyclopedia.*—This is the title of a new journal published at Sandersonville, Georgia, under the proprietorship of Drs. H. N. Hallifield and T. W. Newcome.

It was stated some time since, in the American Medical Gazette, that Professors Lawson and Blackman were about to start a new journal in Cincinnati. We have heard the statement reiterated in private circles, but have no means of knowing certainly as to its correctness.

There is an accredited rumor that several gentlemen are about starting a bi-monthly journal of 96 pages in this city. We understand it is to consist largely of translations and republications of foreign matter, and is to present a large corps of paid contributors.

*The New York Journal of Medicine* has just completed its seventeenth volume. It has hitherto been published bi-monthly, and has sustained, in an eminent degree, the position of a high-toned scientific journal. It now commences a new series, under the name of the American Medical Times, which is to be published weekly.

In every particular this change is, to us, a matter of deep regret. There is no journal on our exchange list which we have prized more highly than the New York Journal. We are not convinced that the change to a weekly is in any wise calculated to improve either its character or prospects. It is well enough that we have weekly journals, and we have not a doubt but this is destined to be one of the first in the country. But we look upon it as essentially a descent from the sublime to the ridiculous, for that journal to come down from the elevated and dignified position it has occupied, to deal in the little matters that almost necessarily constitute the pabulum on which weekly journals subsist. If New York would reach the position she aspires to and to which she ought to be entitled, she would do well to engage in a generous rivalry with Philadelphia, in sustaining such journals as the American Journal of

the Medical Sciences, or the North American Medico-Chirurgical Review.

*The Cleveland Medical Gazette* has reached the end of its first volume as a monthly of 32 pages. It will be continued as a bi-monthly of 80 pages.

H.

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Death of Dr. Sacsche.—Just as we were about to go to press with the last form of the present issue of the Journal, we received the painful intelligence of the death of our esteemed and venerable friend, Dr. Geo. J. Sacsche.

Dr. S. was one of the veteran practitioners of this city. A meeting, including most of the profession of the city, at once assembled and took action expressive of their regard for the deceased.

The resolutions passed, we reproduce, as far as possible, from an impudent mutilation of them published in the city papers.

Whereas, A dispensation of Providence has removed from our midst our fellow townsman, neighbor, and professional brother, Dr. George J. Sacsche; and whereas, we have long regarded him as a high-toned, honorable, devoted and able physician, a dexterous surgeon, a man of liberal learning, a generous friend, and a genial companion: Therefore,

*Resolved*, That we deeply lament the loss which the community, the profession of medicine, and especially his bereaved wife, sustain in his death.

*Resolved*, That in respect to his memory we will attend his funeral in a body, wearing the usual badge of mourning.

*Resolved*, That the secretary of this meeting be instructed to communicate these resolutions, with the earnest expression of our sympathy, to the companion of the deceased, to his friends in Germany through the press of the city of Hamburg, and also to secure their publication in the journals of this city.

Occlusion of the Os Uteri from the use of Caustics.—We make the following significant extract from the records of the Boston society for medical improvement:

"Dr. Storer said he had seen, in consultation, a woman who had been in labor several days, and in whom no os uteri could be found. He learnt that the patient had formerly been treated for ulceration of that part, by the repeated application of caustics. Dr. S. made an incision, three inches in length, into the presenting part of the womb, and an hour afterwards, there having been no pains, he opened the head, and delivered the child. The woman recovered, and afterwards menstruated.

Dr. Parks said he once had under his care a lady who had been treated in Liverpool, for ulceration of the os uteri, by the application of caustic potash. The canal was apparently obliterated, and the cervix eaten off. She afterwards came under the care of Dr. J. H. Bennet, who made an artificial opening, with an instrument he devised for the purpose, which was kept open by means of elastic bougies, introduced from time to time.

Dr. Putnam had been applied to in a case in which caustic potash had been applied to the os uteri during pregnancy, with the effect of diminishing the calibre of the canal. He advised the use of tents until delivery."

The Louisville Journal for March contains the report of two cases of occlusion following the treatment of chronic inflammation of the cervix, in one of which potassa cum calce, and in the other some unknown caustic application had probably been used. These cases contain a wholesome caution.

H.

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In the last number of the Journal we stated incidentally that we supposed that Dr. Stephen Smith, of New York, had abandoned his work on Mal-practice. We received a note from him soon after assuring us that he was still earnestly engaged in his work, and that it was rapidly approaching completion. It will contain the report of several hundred adjudicated cases (500 we believe). From the well known abilities of the author, it is to be hoped that this work, in connection with that of Ellwell, recently announced, will supply the want so generally felt in connection with this subject.

H.

Summer Course of Instruction at Starling Medical College.—During the present summer ten young gentlemen have been in full attendance, and three others have given partial attendance, to the summer course of instruction. The exercises have consisted of a daily visit to the hospital, and four familiar lectures, or recitations. The class is one of unusual diligence and intelligence, and constitutes a most admirable neuclus for the approaching winter class.

H.

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Homeopathy in Cleveland.—We sincerely regret to learn that the principal, if not the only, hospital resources of our friends of the Cleveland Medical College, have been wrested from them and awarded to the Homeopathists. For a number of years our friend professor Weber has occupied the post of physician and surgeon to the county infirmary and city hospital of that place, to which his services have been given gratuitously. Recently he was superceded by the appointment of the professor of surgery in the Cleveland Homeopathic College. We suppose the latter will occupy the place till some spacious representative of spiritualism, or some later edition of humbuggery, supercedes him. It is not at all likely that the city council of that city will very soon award it to any one not the representative of some form of humbuggery.

H.

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Index to Volume XI.—Unfortunately, by an oversight, the index to the volume of the Journal terminating a year ago was omitted. It will be found appended to the present number.

H.

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"*Sleeper's Lightning Fly-Killer—Destroys Flies Instantly, without Danger to Anything Else.*"

The above label is attached to a preparation of a coarse brown paper, sold very generally in this place by druggists and others, and used by many families, for the purpose of killing flies. The inference from the label would be that it is not a poison to anything except flies. A chemical examination of a specimen, how-

ever, proved it to contain over $\frac{1}{8}$ grain of *arsenic* per square inch; another specimen furnished over $\frac{1}{3}$ grain of arsenic per square inch. This proves the label to be an imposition, and instead of the substance being inert, it contains a fatal poison.

The arsenic is readily detached from the paper, and might thus find its way into food. It is also recommended, to make it the more attractive, to moisten the paper and sprinkle it over with sugar. This might induce children to eat it, and thus it might produce fatal effects.

It should therefore be banished from the community as a very daugerous preparation.

W.

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*On the Amount of Cantharidin contained in different Parts of the Body of the Cantharis Vesicatoria, by* M. FERRER. *

Various opinions have been expressed on the question whether the cantharidin is equally distributed all through the body of the insect, or whether it exists only in certain parts to the exclusion of the others. Pliny, Galen, and Aetius believed that the elytra had no action. Hippocrates recommended that the head with its antennæ, the elytra, the membranous wings, and legs, should be rejected, as he considered them completely inert. This opinion was adopted by Schwilgué in the third edition of his *Materia Medica*, which appeared in 1818. Latreille, Cloquet, and Audoin, on the contrary, assert that all parts of the body contain cantharidin.

In 1826, M. Farines, a pharmacien at Perpignan, having tried, without effect, plasters prepared separately with the powder of the elytra, wings, antennæ, and legs, returned to the opinion of Hippocrates, and in a note addressed to the Societie de Pharmacie of Paris laid down the following conclusions:—

1. That the active part resided only in the soft organs.

2. That the hard organs do not possess any vesicating power.

In 1855, M. Courbon, in a memoir presented to the academy, also said that the vesicating principle of cantharides resided only in the soft or internal parts; but in opposition to M. Farines he contended that the soft parts of all regions possessed a vesicating property: that the soft or internal parts of the legs and head are as

* Repertoire de Pharmacie.

active as those of the thorax and abdomen, and that the only parts of the body completely inert are the elytra, the antennæ, and the portions of the feet composed only of hard parts.

In 1856, M. Berthoud sought chemically for cantharidine: 1, in the abdomen and thorax, which he designated the *soft parts* of the flies; and 2, in the elytra, wings, antennæ, and feet, which he called the horny parts:

250 grammes of the abdomen and thorax gave 0.45 of cantharadin.

125 grammes of the horny parts gave 0.053.

These results, completely opposed to the conclusions of M. Farines, do not, however, demonstrate the existence of cantharidin in every part of the body of the fly. They only serve to confirm the opinion and the observations of M. Courbon. The parts which M. Berthoud has named collectively the horny parts, and from which he has extracted the cantharidin, contain in their interior a certain quantity of soft parts (the soft parts of the head and legs) and the cantharidin might be obtained exclusively from these soft parts if the observations of M. Courbon were strictly true.

On a question so interesting and as it appeared to me so imperfectly resolved, I thought it would be useful to make some new researches. To ascertain whether cantharidin is indifferently distributed over every part of the body, or whether it is only contained in particular parts, I have sought for it;—1, in the feet and legs; 2, in the head; 3, in the elytra and wings; and 4, in the thorax and abdomen.

First experiment:—11 grammes of the feet and legs were powdered and treated in a displacement apparatus with 25 grammes of chloroform; after macerating for three days the liquid was run off and the chloroform displaced by means of alcohol. The chloroform so obtained was allowed to evaporate in the air, and the residue was placed between folds of blotting paper to absorb the oil. The crystals left were redissolved in a small quantity of chloroform, again crystallised and then weighed. From the 11 grammes of the feet, 0.01 of cantharidin was obtained, still stained with a little of the green oil.

Second experiment:—17 grammes of the head and antennæ (there were very few antennæ) were treated with 35 grammes of chloroform, like the preceding, and from them 0.015 of cantharidin was obtained.

Third experiment:—11 grammes of the elytra and membranous

wings were treated with 25 grammes of chloroform, and yielded 0.009 of cantharidin.

Fourth experiment:—30 grammes of the thorax and abdomen were mixed in a displacement apparatus with 70 grammes of chloroform. In this experiment the residue obtained by the spontaneous evaporation of the chloroform, furnished a large quantity of crystals. After having absorbed the oil and redissolved the crystals in a small quantity of chloroform, I threw the solution on a filter. After filtration I opened the paper and found it covered with small micaceous crystals of cantharidin perfectly white. The chloroform had deposited the crystals as it evaporated, and the green oil had passed through with the chloroform which had not evaporated. As this last portion might still contain a small quantity of cantharidin, I evaporated and again dissolved it in a little chloroform, and threw it on a filter as before. After repeating this a third time I obtained all the cantharidin furnished by the 30 grammes of the thorax and abdomen perfectly white. It weighed 0.072 grammes.

The blisters produced on my arm by a very small quantity of the crystals obtained in my experiments, left no doubt of their nature. From these experiments the author draws the conclusion that the active principle of cantharides is found distributed over all parts of the body.

[It is obvious from the above experiments:—1, that the feet and legs of the insect furnished $\frac{1}{1666}$ their weight of cantharidin; 2, the head and antennæ, $\frac{1}{1133}$; 3, the elytra and membranous wings, $\frac{1}{1222}$; and 4, the thorax and abdomen, $\frac{1}{4116}$. The mean product of the insect being $\frac{1}{666}$ its weight of cantharidin.

500 grains of the best insect that could be obtained in this market, and which looked very fair, when treated according to the above process, furnished $\frac{31}{100}$ of a grain of cantharidin. This would be in the proportion of $\frac{1}{1613}$ the weight of the insect. W.]

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Prize Offered.—From our exchanges we take the following, which should be of interest to many of our readers:

"To the Medical Students of the United States of America.—I will give a premium of $250 for the essay which

shall be judged the best, by competent judges, on the 'Anatomy and Physiology of the Animal and Organic Nervous Systems.' The essays to be sent to me on or before the first of March, 1861. I will likewise give a second premium of $250 for the best essay on the same subject; the essays to be handed in on or before the first of March, 1862.

"The medical students who shall be declared the successful competitors will be required to declare, on their *word* and *honor*, that the essays are their own production, and that they have not been assisted by any legally qualified medical man.

"JOHN O'REILLY, M. D.,
230 Fourth st., Washington Square, N. Y.

"March 8, 1860."

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### *Fœtid Perspiration of the Feet—Bromidrosis.*

In a recent number of the Boston Medical and Surgical Journal, Dr. B. Joy Jefferies adduces notes on this subject from the lectures of Prof. Hebra, on the anatomy and physiology of the skin, delivered in the University of Vienna, in 1847. They are as follows:

"There is no doubt that the sweat glands play an important part in the animal economy. Unfortunately, their physiological, and, still more, their pathological relations are but slightly understood. In general, we know that the secretion of sweat is very copious after hard work or continued bodily exertion, especially in the heat; and further, that it is under the influence of the nervous system.

"The sweat is colorless, salt to the taste, has a weak acid reaction, and a peculiar smell. It can scarcely be denied that every individual disseminates a peculiar specific odor. This is proved by dogs following their master's track, and finding him by the help of their greatly-developed organ of smell. *Our* organ of smell does not possess the necessary development to enable us to determine such differences. But there are individuals whose peculiar penetrating odor can be easily recognized by every one. It is a great mistake to attribute such a disagreeable smell to the *sweat alone*. We must rather ascribe it to the secretion of the sebaceous glands. We may be convinced of this by simply examining an

individual, the excretions of whose skin have a bad odor. On the palm of the hand, where there are only *sweat* glands, we shall not find any unpleasant smell; it will, on the contrary, be strong on those parts of the body where the sebaceous glands are numerous —as the back, and more particularly in the arm-pits. It is moreover certain that the smell does not come immediately from the *fresh* secretion, but that it exists after this has decomposed. The fresh secretion has either none, or else a slight odor of rancid fat. But if the sweat remains some time in contact with the skin, it undergoes a chemical change, and then the disagreeable smell will be perceived. We will enter more particulary into this subject when we speak of the 'fœtid foot sweat,' which long ago was considered to be a materia peccans whose elimination from the body was desirable, and with whose healthy excretion no therapeutical interference was allowable."

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"We come now to speak of a subject upon which similar erroneous views still exist. It is the so-called 'fœtid foot-sweat' (bromidrosis). We have already said that the sweat, when secreted, has no bad odor. Hence it comes that persons troubled with this 'fœtid foot-sweat' have no disagreeable odor on the palms of the hands, no matter if the perspiration trickles from them. And when the feet are carefully and properly cleansed (together with the toes and nails), they lose the highly-penetrating smell when they again begin to perspire. This so-called bromidrosis localis is found most frequently in young people, who neglect proper cleanliness, and who possess no superfluity of covering for the feet, so that this is seldom changed. Hence, by the decomposition of the collected sweat, free fat acids are formed that have a disagreeable odor. These are absorbed by the pores of the leather, and one can easily convince himself, through his sense of smell, that the boots are the seat of the odor. Persons wearing a light covering for the feet and often changing it, will have little trouble from 'fœtid foot-sweat.' Hence this seldom occurs in the female sex, although the perspiration is more copious in women.

"As, from what has been said, it is evident that we have to deal rather with 'stinking boots' than 'fœtid foot-sweat,' the absurd ideas which are in circulation as to the evil effects of suppressing or too quickly checking the sweating of the feet, must be entirely

given up. On other parts of the body also, where the secretion has an opportunity to remain some time in contact with the surface of the skin, *e. g.* in the arm-pits, on the scrotum, perinæum, &c., a similar decomposition of the sweat takes place, and a very disagreeable odor is created. The treatment of this 'fœtid sweating of the feet,' is therefore reduced to ordering greater attention to the cleanliness of the skin, and a more frequent changing of the covering of the feet."

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Singular case of Loss of the Hair.—Dr. H. O. Jewett, of Cortlandville, N. Y., communicates the following to the Boston Medical and Surgical Journal: "—— Corey, a boy aged about 10 years, presented himself in my office. Struck with his singular appearance, I requested him to remove his hat, which he did with some reluctance. Not a hair was to be seen—neither had he eyebrows or eyelashes; and upon a critical inspection, not a vestige of down or even the rudiment of a hair could be detected upon any part of the body. The lad seemed unusually intelligent for one of his years. He stated that he had enjoyed sound health, having had scarcely a sick day in his life; that when an infant, he had hair like other children; but when four or five years of age, and while in perfect health, it began to fall off, and in a few weeks left him completely hairless. He also stated that though he exercised much, he never perspired. He said, jocosely, that his mother thought 'there were no pores in his skin for the sweat to come out;' and indeed his appearance seemed to justify the old lady's novel conclusion. The scalp and some parts of the body exhibited the glossy, polished aspect presented by the heads of old men who have been bald many years. Nothing like capillary follicles was observable upon any part of the surface; yet the skin was otherwise normal and healthy."

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Dr. S. M. Bemiss has been appointed by Governor Magoffin, of Kentucky, to the new office of Registrar, created by the recent act adopted by the Legislature, requiring the registration of Births, Marriages and Deaths. The salary is $1500 a year, and the Registrar is required to publish an annual report, a work of considerable labor.

Origin of Vaccine Virus.—M. Depaul, in a report to the French Academy, has carefully investigated the origin of vaccine virus. The questions he had to answer were: Is the cowpox a disease which has been spontaneously developed in the cow? Or is it the result of an accidental inoculation made with the discharge from the legs of the horse? Or, again, will these two diseases, independently the one of the other, produce a liquid which, when inoculated in the human subject, will preserve him from the small pox? M. Depaul finds that the first of these hypotheses is the only probable one.—*Med. Times and Gaz.*, April 28th, 1860.

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Electricity as a Means of Light in Surgical Operations —An apparatus for this purpose was lately exhibited to the Society of Arts in Edinburgh. It consists of a small glass tube doubled upon itself and filled with carbonic acid, hydrogen, nitrogen, or other gas, according to the quantity of light required. Into each end of the tube is introduced a wire from the poles of a coil machine, and when the current of electricity is established, the tube is lighted up without heat being evolved. The instrument is capable of a great number of modifications, and could be adapted for almost any region.

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Dr. Edward Warren, of Edenton, N. C., editor of the *North Carolina Journal of Medicine*, has received the post of Professor of Materia Medica and Therapeutics in the University of Baltimore, Maryland, lately vacated by the death of Dr. Charles Frick. We hope he will prove as successful in his professorial as he has already in his editorial career.

Dr. W. A. Hammond, U. S. A., has received the appointment of Professor of Anatomy and Physiology in the University of Maryland, in the place of Professor Roby, who has resigned.

Middle Georgia Medical College is the name of a new institution inaugurated at Griffin, Ga., making the fourth medical college in the State.

Dr. E. R. Peaslee has resigned the chair of Obstetrics and Diseases of Women and Children, in the New York Medical College.

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